DOCUMENT RESUME

ED 303 021 EC 212 113

AUTHOR	Empson, Judith V.; And Others
TITLE	An Impact Evaluation of the Resource Access Projects, 1986-1987.
INSTITUTION	Littlejohn (Roy) Associates, Inc., Washington, D.C.
SPONS AGENCY	Administration for Children, Youth, and Families (DHHS), Washington, D.C.
PUB DATE	Jun 88
CONTRACT	HHS-105-86-1519
NOTE	198p.; For earlier versions of this document, see ED 189 799, ED 250 069, ED 250 077, and EC 211 212.
PUB TYPE	Reports - Evaluative/Feasibility (142)
EDRS PRICE	MF01/PC08 Plus Postage.
DESCRIPTORS	*Agency Cooperation; *Delivery Systems; *Disabilities; Inservice Education; *Mainstreaming; Management Information Systems; Preschool Education; Program Costs; Program Evaluation; Regional Programs; Technical Assistance
IDENTIFIERS	Education of the Handicapped Act Amendments 1986; *Project Head Start

ABSTRACT

The report provides evaluation data (1986-87) for the Resource Access Project (RAP) network, a system to facilitate the delivery of handicap services in Head Start programs. The introduction provides background information on the network and summarizes changes in the network during this program year. Changes include budgetary cuts due to the Gramm-Rudman-Hollings amendments and new requirements of Public Law 99-457 (Education of the Handicapped Act Amendments, 1986), Part H, providing services for handicapped infants and toddlers. The second section examines the RAP budget including the funding history of the RAP network and an analysis of the 1986-1987 budget. Results of the Head Start Telephone Survey are reported in terms of overall Network performance. In the next section activities are detailed for each of the five priority tasks of the 11 regional RAPs for this time period: (1) Provide support, services, and materials; (2) Provide training to Head Start staff; (3) Facilitate collaboration; (4) Actively participate in RAP Task Forces; (5) Maintain the computerized management information system. The fifth section lists materials RAPs plan to develop in the upcoming year. The final section summarizes findings and provides recommendations. Appendixes provide profiles of each of the 11 RAPs (including background, location, regional situation, operations, mainstreaming training conferences, short-term conference evaluation, resource providers, management information system, and telephone survey results); and summaries of impressions of the state education agencies working with each of the RAPs. (DB)

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An Impact Evaluation of the Resource Access Projects 1986-1987

HHS-105-86-1519

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Acknowledgements

The RAP management support contractor wishes to thank several people for their cooperation and assistance in the preparation of this report.

Ms. Jane DeWeerd, our project officer, has been a consistent advocate and knowledgable resource over the course of the past 12 months. We appreciate her efforts on behalf of the management support contract.

The management support contract staff relies heavily on the RAP network for substantive information about their day-to-day activities. We thank RAP staff members for the serious consideration they have given to each of our questions and requests. Each year they have approached our assessment process as an opportunity to examine their own work and to refine their efforts on behalf of children with handicapping conditions.

Hundreds of representatives of Head Start and State Education Agencies once again gave graciously of their time and experience to review the services they have received from RAPs in their service areas. This most valuable feedback is central to our assessment of the strengths and weaknesses of the network, and we are grateful to these individuals for their cooperation.

Finally, we wish to thank Louise DuRant for her professional formatting and typing of the final report.

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I
INTRODUCTION

Background of the Resource Access Projects

Head Start began in 1965 with a mandate to build a greater degree of social competence among the nation's low-income children and to prepare for greater success in their communities and at school. Head Start provides comprehensive developmental services for children three to five years old by building components into its design for education, social services, nutrition, health, and parent involvement.

By 1971 Head Start designed a pilot program to mainstream children with handicaps. Head Start's commitment to children with handicaps was formalized with the passage of the 1972 Amendments to the Economic Opportunity Act, mandating that 10 percent of the enrollment opportunities be available to children with handicaps. Most recent statistics available from the Project Head Start 1986-1987 Statistical Fact Sheet showed that 446,523 children were enrolled in Head Start and 56,708 or 12.7 percent were professionally diagnosed as handicapped.

Children with special needs and their families place additional responsibilities upon Head Start staff. Staff must be trained to recruit and assess children with disabilities, locate appropriate diagnosticians, interpret diagnostic findings and translate them into meaningful curricula, work with parents, attract additional staff, assist with payment of special services, provide special services, establish cooperative working relationships with service agencies, facilitate the transition into public schools, and many more tasks requiring special skills and sensitivity. In 1976, the Administration for Children, Youth and Families (ACYF) funded a network of Resource Access Projects (RAPs) to assist local programs with the acquisition of these skills.

In the 1986-1987 program year, 11 RAPs were funded to conduct training, develop and disseminate materials and information, facilitate collaboration and training between Head Start grantees and other programs serving handicapped preschoolers, and provide technical assistance in such areas as special education, Head Start policy, and management of the handicap effort. The RAPs also worked in concert with ACYF regional office personnel, state Head Start associations, State and Local Education Agencies, and other providers of assistance in their areas. Table 1.1, RAP Sponsors and Service Areas, shows the regions of the Department of Health and Human Resources that are served by the RAPs, the states constituting each catchment area, and the names of RAPs' sponsoring agencies.

RAPs differ widely on various factors which affect the delivery of services. Three of the most significant variables are geographic size, number of grantees, and size of grantees. These variables are exhibited in Table 1.2, Characteristics of Individual RAP Service Areas. The second column of the table shows the number of Head Start grantees within each RAP's domain. The average number of grantees in 1986-87 was 114. Seven RAPs served fewer than the average number of grantees. Those RAPs with the largest grantee burden were Chapel Hill (222), Great Lakes (220), Texas Tech (149), and University of Maryland (139).

RAPs with the largest burdens had other characteristics which tended to offset their disadvantages. For example, Great Lakes and Chapel Hill RAPs, having the greatest number of grantees and the highest number of children with handicaps, had larger-than-average staffs. Likewise, University of Maryland RAP had a

Table 1.1
RAP Sponsors and Service Areas*

DHHS REGION	STATES	RAP SPONSORS
I	Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, Vermont	New England RAP Education Development Center Newton, Massachusetts
II	New Jersey, New York, Puerto Rico, Virgin Islands	New York University RAP New York University New York, New York
III	Delaware, District of Columbia, Maryland, Pennsylvania, Virginia, West Virginia	University of Maryland RAP University of Maryland College Park, Maryland
IV	Florida, Georgia, North Carolina, South Carolina, Alabama, Kentucky, Tennessee	Chapel Hill RAP Chapel Hill Outreach Project Carrboro School District Chapel Hill, North Carolina
	Mississippi	Mississippi RAP Friends of Children of Mississippi Head Start Jackson, Mississippi (Subcontracted through Chapel Hill Outreach Project)
V	Illinois, Indiana, Ohio, Michigan Minnesota, Wisconsin	Great Lakes RAP University of Illinois Champaign, Illinois
VI	Arkansas, Louisiana, New Mexico, Oklahoma, Texas	Texas Tech University RAP Texas Tech University Lubbock, Texas
VII	Iowa, Kansas, Missouri, Nebraska	Region VII RAP University of Kansas Medical Center Kansas City, Kansas
VIII	Colorado, Montana, North Dakota, South Dakota, Utah, Wyoming	The Denver RAP Metropolitan State College Denver, Colorado
IX	Arizona, California, Nevada, Hawaii	Southwest Human Development RAP Southwest Human Development Phoenix, Arizona
X	Idaho, Oregon, Washington, Alaska	Portland State University RAP Portland State University Portland, Oregon

*Changes in makeup of the RAP network since its inception in 1976 are as follows. In 1977-78, the Mississipp and Alaska RAPs were added and the RAP serving Indian programs was removed. In 1978-79, the Pacific RAP wa added, and Texas Tech replaced the University of New Mexico as the RAP contractor for Region VI. In 1979-80 Georgetown University replaced PUSH/RAP in Keyser, West Virginia, as the contractor for Region III. In 1980 81, the University of Denver replaced the Mile High RAP as the contractor for Region VIII, and Portland Stat University replaced the University of Washington in Region X. In 1984-85 the Indian RAP was added to the net work. In 1985-86, University of Maryland replaced Georgetown University as the RAP in Region III; Southwes Human Development replaced Los Angeles RAP in Region IX; Metropolitan State College replaced University of Denver in Region VIII, and Three Feathers Associates replaced The American Indian Law Center as the India Services RAP. In 1986-87, the states served by Nashville and Portage RAPs were consolidated into the Chape Hill and Great Lakes RAPs, respectively. Pacific and Alaska RAPs were eliminated and reduced services wer provided to these areas by SWHD and PSU RAPs, respectively. The status of the Indian RAP was changed.

Table 1.2
Characteristics of Individual RAP Service Areas

RAP	# Head Start Grantees	#Head Start Teaching Staff	# Handicapped Children	Square Miles	RAP FTE	FTE Per Grantee	FTE Per Teaching Staff	FTE Per Handicapped Child
New England	80	1,768	3,085	67,000	3.2	25	553	964
NYU	98	4,641	7,722	61,000	3.8	26	1,221	2,032
U of Maryland	139	3,497	6,098	123,000	3.5	40	999	1,742
Chapel Hill	222	6,968	9,572	323,000	4.9	45	1,422	1,953
Mississippi	23	2,796	3,044	48,000	3.8	6	736	801
Great Lakes	220	6,422	11,943	322,000	6.5	34	988	1,837
Texas Tech	149	5,080	7,157	561,000	3.4	44	1,494	2,105
Region VII	72	1,479	3,150	285,000	3.3	22	448	955
Denver	59	1,020	1,524	574,000	3.4	17	300	448
SWHD	103	6,195	5,964	390,000	6.4	16	968	932
PSU	84	1,410	1,572	835,000	3.4	25	415	462
Average	114	3,752	5,530	326,300	4.1	27	905	1,334

relatively large number of grantees but had a relatively small geographic area to serve. Denver and PSU had the largest geographic areas, but served low numbers of handicapped children and relatively smaller grantees. Texas Tech was the only RAP with little to offset its burden. This RAP had the third highest grantee load, the fourth highest number of handicapped children, the third largest land area and one of the smallest FTE staffs. Conversely, Mississippi and New England had relatively small geographic areas, low numbers of grantees, and fewer handicapped children to serve.

Other variables that facilitate or thwart RAPs' efforts to deliver services to grantees, are the number of states within the catchment area, local legislation affecting services to handicapped children, culturally diverse populations, numbers of new grantees, cost and proximity of transportation, and availability of resource providers. Each RAP must become familiar with its territory and grantees' needs to shape its services to best meet grantees' needs.

Changes in the Network During the 1986-1987 Program Year

The 1986-1987 program year was the second of a three-year contract between RAP projects and ACYF. The budgets had been negotiated, the tasks fixed, and the contractors predetermined. However, two legislative events at the federal level had widespread effects which reverberated throughout the RAP network: the passages of the Gramm-Rudman-Hollings amendments and Public Law (PL) 99-457.

The Gramm-Rudman-Hollings amendments required substantial budgetary cuts in federally funded projects. The RAP network was reduced to the level of its funding in FY 1983. (The next chapter treats these fiscal cuts in more detail.)

Changes in the configuration of the network followed budgetary cuts. An effort was made to fund only one RAP per region. The geographic areas formerly served by Nashville and Portage RAPs were consolidated with those of Chapel Hill and Great Lakes, respectively. The high cost of serving the grantees in the Pacific and Alaska led ACYF to eliminate the RAP contractors in those locations and reassign responsibility for services to these grantees to the SWHD and PSU RAPs, respectively. Finally, substantial cuts were also made to the Three Feathers budget which had provided RAP services to the Indian Head Start programs in five western states. Three Feathers continues to provide training to Indian grantees as a Head Start Resource Center, but not as a RAP.

Although substantial cuts were made in the budget for the RAPs, commensurate reduction in the workload did not occur. While administrative functions previously carried out by two RAPs in a region were consolidated (e.g., mailings and needs assessment surveys and analyses), the same general expectations remained for delivering services to grantees and working with other agencies serving children with handicaps. Each RAP was given a voice in determining how their budgets would be reduced. Most chose to cut travel by reducing the number of smaller training sessions held for grantees, and instead hosting a few large conferences. Also most chose either to limit the number of RAP advisory committee meetings from two to one, or to reduce the number of paid participants, or both.

Simultaneously with the reorganization of the RAP network and reduction of budgetary resources, the passage of landmark federal legislation redefined services to handicapped children. PL 99-457 made services available to handicapped children from three-to-five-years-old by the school year 1990-1991 and introduced a new program, Part H, for infants and toddlers with handicaps or who are at risk for developmental delay because of medical or environmental factors. States must submit applications for the funding and establish interagency committees of service providers to the children targeted. Most states were exploring new territory as few had any history of delivering mandatory services from birth. Where models for service delivery already existed, the need for collaboration among state and local agencies was a new responsibility. Head Start programs, too, were on unfamiliar ground because their population consists largely of three-, four-, and five-year-olds.

To add to the organizational tangle, publication of federal regulations regarding service delivery was severely delayed. States were even uncertain whether they would apply for funding for Part H. (e.g., California needed the passage of state legislation before it could apply for the federal funds). Beneath the irresolution of some states lay skepticism that federal funding would be insufficient to adequately meet the commitment that had been made.

It was within this context that the RAPs began the 1986-87 program year. Four of eleven RAPs had additional states to serve. All foresaw that introducing Head Start into the interagency schema required by the legislation would require additional work. By the end of the year most RAPs had indeed become deeply involved working with Head Start programs to define their role under the new legislation.

Goals and Tasks of the Network

The specific tasks to be completed by the RAPs are laid out in their contracts. There are 11 tasks, listed below, which each contractor has the same obligation to fulfill. However, they are allowed latitude in carrying out these tasks. Each RAP views certain tasks as more important than others.

The RAP staffs prioritized their tasks using the ranking of major, moderate, and minimal importance. (Tasks of major importance were given the value of five; moderately important tasks rated three; tasks of minimal importance received a score of one.) The composite profile for the network in 1986-87 was as follows:

Task	Score
Provide training and support to Head Start grantees	55
Provide services and materials	55
Conduct an assessment of the needs of grantees	55
Facilitate collaborative agreements	53
Establish contact with Head Start directors	45
Actively participate in national RAP Meetings	41
Actively participate in task forces	35
Establish an advisory committee	33
Maintain an updated file of resource providers	31
Maintain the RAPPLE Management Information System	23
Assist with the Annual Survey	17

The first four tasks were considered to be of major importance by almost every RAP. Likewise, two tasks fell well below the rest in importance.

In addition to ranking their tasks, RAPs articulated their major goals for the 1986-1987 program year. This open-ended question yielded a dominant theme: to collaborate with agencies or programs working with young handicapped children. Almost every RAP cited this as a major goal and most referred to PL 99-457 as the catalyst. A second major theme pertained to training (setting goals for numbers of events or participants, selecting content, and responding to needs). Other significant goals for the year included the targeting of handicap coordinators (the nexus between RAPs and better services to children with handicaps), the continuation of good relationships with Regional Office staff, the integration of Indian and migrant programs with regional Head Start programs, an increased visibility for RAPs among selected constituents, and the development of services for more severely impaired children.

The Management Support Process

The RAP network is assessed annually by Roy Littlejohn Associates (RLA). The process was conceived by ACYF at the inception of the RAP program and has been used since to collect data about the performance of the network, as well as to serve as a management tool. The mechanism is a formative assessment. This report reviews the RAP performance during the period from July 1, 1986, to June 31, 1987.

Findings are based on personal interviews with RAP staff at six sites (New England, Chapel Hill, Mississippi, Great Lakes, Denver, and Region VII) and extensive written materials from the remaining five RAPs, and telephone interviews with staff at 233 randomly selected Head Start programs throughout the country and at 52 State Education Agencies (SEAs). In addition, RLA evaluated assessment forms from 1,100 participants at 34 RAP training events. The management support contractor was thus able to get feedback from the most significant sources, RAPs' clients, as well as the RAPs themselves and those who collaborate with them.

The RAP site visits were conducted by members of the management support team in July and August 1987. Information about RAPs' task records was compiled from data disks sent to RLA offices by each RAP, an innovation made possible by the RAPs' use of a computerized recordkeeping system. The Head Start telephone survey began in January and concluded in March 1988. The SEA telephone survey was conducted in December 1987.

Four instruments were used to collect data. An interview guide was used to explore RAPs' performance on each of their 11 contractual tasks. The guide structured the on-site discussions held with six RAPs. RAPs which were not visited this year completed the same interview guide in writing and returned it to RLA with supporting materials.

Questionnaires were used to conduct the telephone surveys with the Head Start and the SEA respondents. Though different forms were designed for each group, information was obtained in both surveys about the nature and satisfaction of their contacts with RAPs, problems, recommendations, and services which they considered to be most valuable.

The training assessment form was designed to collect information about the trainings topics presented this year, satisfaction with the presentations, ways in which trainees hoped to apply the information, problems, and suggestions for future training.

The management support staff included three analysts. The project director has served in her role since the beginning of the project in 1976. The other team members have worked with the project for eight to ten years.

II
RAP BUDGET

This chapter presents a brief funding history of the RAP network since it was established in 1976. The funding history gives an overview of the programmatic shifts that accompanied each of the budgetary changes. Following the funding history is a presentation of the budget from the perspective of the average RAP. Finally, the individual line items for the RAP projects are analyzed.

Funding History of the RAP Network

The funding levels of the RAP network for the 11 years of its history are shown in Table 2.1, Total Program Budgets. The RAP program began in FY'77. The first budget supported 12 regional projects with staffs usually working part time. The thirteenth RAP was funded later that year to serve Indian and migrant (IMPD) Head Start programs throughout the country.

In FY'78, the Mississippi and Alaska RAPs were added to the network, and the RAP which served IMPD Head Start programs was terminated. The FY'78 budget enlarged travel allotments which had been substantially underfunded in the first year. Also, a new program initiative promoting formal collaborative agreements between State Education Agencies and Head Start programs was introduced into the scope of work.

The program budget in FY'79 rose by 38.6 percent over FY'78. The network was expanded to include a RAP located in Hawaii to serve Head Start grantees in the Pacific; Texas Tech was introduced to the network, replacing the previous contractor for Region VI. The FY'79 budget ushered in two new initiatives: a massive training effort to orient Head Start teachers to the concepts of mainstreaming children with handicaps and a pilot computerized management information system for the network. The FY'79 budget supported more full-time project staff, permitting the RAP projects to reduce their dependence on part-time staff supported by other grants of their sponsoring agencies.

For FY'80, the budget increased by 9.7 percent. The computerized management information system was expanded to all continental RAPs, salary levels were increased, and travel costs rose commensurate with inflation. Some other costs decreased. The RAP at Georgetown University replaced the previous contractor for Region III.

The FY'81 program budget rose 20.7 percent over the previous year. The major program initiative was the revitalization of the network's management information system. Two contractors, Portland State University (PSU) and the University of Denver, each with higher fringe and overhead rates, replaced two RAPs funded in previous years. All but one of the RAP contracts were signed with options for FY'82 and '83.

The government picked up its option for FY'82 at costs which had been submitted and negotiated previously. The total program budget rose by 10.9 percent over the previous year, but the tasks and programmatic initiatives were unchanged. In FY'83, costs were contained again by means of the contract options. New monies amounted to an 8.2 percent increase over the previous year.

Table 2.1
Total Program Budgets

Line Items	FY'77	FY'78	FY'79	FY'80	FY'81	FY'82	FY'83	FY'84	FY'85	FY'86[b]	FY'87
Salaries	$ 460,257	$ 557,592	$ 729,461	$ 741,386	$ 845,854	$ 947,743	$1,050,589	$1,100,299	$1,343,807	$1,485,663	$1,122,848
Travel	74,386	120,656	172,204	185,236	247,689	257,780	251,763	283,372	345,656	481,404	257,534
Computer	N/A	N/A	44,322	119,529	138,100	160,332	160,204	146,187	188,856[a]	52,143	22,245
Other Costs	198,254	127,748	237,359	229,117	234,188	256,415	274,340	301,286	353,820	518,755	335,661
Overhead & Fringe	144,994	245,711	274,186	323,852	464,536	518,850	580,499	700,355	876,814	765,965	582,327
TOTAL BUDGET	$ 877,891	$1,051,707	$1,457,732	$1,599,120	$1,930,367	$2,141,126	$2,317,395	$2,531,500	$3,038,953	$3,303,930	$2,320,615

[a] Figure based on 15 RAPs; Indian Services RAP did not have a computer.

[b] During the 1985-1986 program year RAPs were funded for between 10 and 13 months so that all projects would be on the same funding cycle beginning with the 1986-1987 program year. All figures represent budgets that have been prorated on a 12 month basis in order to provide the reader with comparable data from previous years. The actual funding for FY'86 was: Salaries $1,402,431; Travel $446,877; Computer $48,292; Other Costs $485,431; Overhead & Fringe $719,755; Total Budget $3,102,786.

New funds in FY'84 amounted to a 9.8 percent increase over FY'83. This was the first year where new budgets were negotiated after being locked into a three-year commitment.

In FY'85 the overall RAP budget increased by 20 percent over FY'84, amounting to $507,453. The addition of a sixteenth RAP to serve Indian grantees in eight states accounted for 41 percent of the new monies. Indian grantees in other states, as well as all migrant grantees, were added to the service areas of other RAPs, increasing individual RAP budgets.

Again in FY'86 the overall RAP budget rose. (In FY'86 the actual RAP budget was $3,102,786. It supported some RAPs for 12 months, some for as few as 10 months, and some for 13 months so that every RAP would have the same funding date of August 1 in FY'87. For the purposes of comparison, we have prorated all FY'86 budgets so that each has a 12-month funding period. This manipulation has a slightly inflationary effect upon the FY'86 budget, increasing it to $3,303,930. All comparisons between FY'86 and FY'87 use the prorated figures.) The nine percent increase over the year before supported four new contractors replacing previously funded ones. New contractors at University of Maryland, Metropolitan State College in Denver, Southwest Human Development Services (SWHD), and Three Feathers Associates used costing practices which differed from their predecessors. "Other" costs rose significantly because of the increased use of consultants or contracted services. Indirect costs decreased due to newly negotiated overhead rates with several contractors. Computer costs also declined with the loss of the support management contractor for the Management Information System (MIS). Also, during this year, the work period for the RAPs was standardized so that all funding would begin on August 1.

For the first year in the 11-year history of the RAP network, the program received a budgetary cut in FY'87. The overall funding level of FY'87 was 25 percent below the actual funded amount for FY'86. Budgetary reductions occurred throughout federally financed programs in FY'87 in accordance with the requirements of the Gramm-Rudman-Hollings amendment to federal legislation.

The RAP budget for the 1986-87 year totaled $2,320,615, declining to the level of funding in FY'83 as seen in Table 2.1. Cuts were realized by consolidating RAP projects in Regions IV, V, IX, and X; reducing services to Alaska, the Pacific Islands, and Indian grantees; and decreasing budgets at the remaining RAPs.

The Nashville, Pacific, and Alaska RAPs were eliminated. The Portage RAP became a subcontractor to University of Illinois, forming the new Great Lakes RAP. Reductions were most apparent in the travel, computer, and "other" cost categories. The travel budget for the network fell by 47 percent compared to the previous year; individual RAPs showed an average decrease in travel of 22 percent. The computer line item dropped by 57 percent for the network and by 30 percent on the average for individual projects. "Other" costs declined by 35 percent for the network and on an average of 6 percent at individual projects. Individual RAPs averaged a slight increase in 10 percent in both the salary and 11 percent overhead/fringe costs.

Individual line items maintained nearly the same proportions of the total budget relative to previous years. Salaries represented 48 percent of the budget, overhead 15 percent, "other" costs 15 percent, travel 11 percent, fringe 10 percent, and computer 1 percent.

Compared to the previous year, RAP budgets decreased between .5 and 52 percent, except for University of Maryland which had a minor increase of less than 1 percent.

For those RAPs with unchanged service areas, budgetary decreases ran between less than 1 and 8 percent.

Those individual RAPs most severely penalized by budgetary reductions were the four effected by consolidation, the Chapel Hill and Great Lakes RAPs, and, to a lesser extent, the SWHD and PSU RAPs.

Both Chapel Hill and Great Lakes substantially increased their service areas, almost doubling the grantee loads. Each had higher budgets this year, but by only 19 and 50 percent, respectively. At SWHD and PSU, where each was given additional areas in the Pacific and Alaska, respectively, budgets were actually lower than the previous 12-month operating period by 13 and 7 percent, respectively.

In this climate of reduced resources, service demands remained constant. The following section describes the way RAPs staffed their projects and distributed their funds.

The Typical RAP

The variations among individual RAP budgets are seen in Table 2.2, RAP Project Budgets, 1986-1987. They ranged from $152,598 at Region VII RAP to $249,577 at SWHD and $249,000 at Chapel Hill. Differences exist within the budget line items because RAPs differed in their needs for staff travel, telephone, and other expenses due to variations in geography, local cost of living, needs of their service areas, and practices of their funding sponsors. The introduction of this report identifies some of the regional factors which place varying demands on RAP budgets. To summarize briefly, RAPs have wide-ranging numbers of Head Start grantees to serve and large variations in the size of the populations of handicapped children. Additionally, the geographic size of the regions served by RAPs affects the relative amounts of the travel budgets. Furthermore, some RAPs serve diverse cultural populations or must adapt to particular state or regional service systems.

To facilitate comparisons of these budgets, we have constructed a hypothetical "typical" budget and service area based on averaged figures for RAPs in the 1986-87 program year. The "typical" RAP serves Head Start programs that enroll 5,530 handicapped children in a catchment area of 4.5 states. Although it serves more grantees, and consequently more children, in more states than in past years due to the consolidation, the budget is almost identical to that of the previous year ($210,965). Table 2.3, Comparison of Averaged Line Items Within RAP Budgets, FY'77-FY'87, displays the average budget for the "typical" RAP from FY'76 to the present. The distribution of the budget this year was as follows:

Table 2.2
RAP Project Budgets 1986 - 1987

RAP	Total Budget	Selected Budget Line Items: Salaries	Travel	Other Costs	Computer	Overhead & Fringe	OH & Fr as % of Sal.	Staff: FTE	Sal/FTE
New England	$ 202,000	$ 92,780	$ 9,960	$ 23,070	$ 625	$ 75,565	81.4 %	3.2	$ 28,994
NYU	231,000	110,903	14,385	27,046	2,116	76,550	69.0	3.8	29,185
U of Md.	188,512	81,507	15,480	30,709	2,130	58,686	72.0	3.5	23,288
Chapel Hill	249,000	110,698	36,182	32,162	2,557	67,401	60.9	4.9	22,591
Mississippi	166,500	76,219	20,648	26,320	2,906	40,407	53.0	3.8	20,058
Great Lakes	241,434	137,288	22,400	40,800	-	40,946	29.8	6.5	21,121
Texas Tech	236,000	112,462	42,274	24,862	5,250	51,152	45.5	3.4	33,077
Region VII	152,598	81,776	20,177	20,691	2,500	27,454	33.6	3.3	24,781
Denver	185,999	94,793	36,692	12,712	-	41,802	44.1	3.4	27,880
SWHD	249,577	143,942	16,725	69,629	2,501	16,780	11.7	6.4	22,491
PSU	217,995	80,480	22,611	27,660	1,660	85,584	106.3	3.4	23,671
TOTAL	$2,320,615	$1,122,848	$257,534	$335,661	$22,245	$582,327	-	45.6	-
AVERAGE	210,965	102,077	23,412	30,515	2,022	52,939	51.9	4.1	24,624

Table 2.3

Comparison of Averaged Line Items Within RAP Budgets FY'77 - FY'87

	FY'77	FY'78	FY'79	FY'80	FY'81	FY'82	FY'83	FY'84	FY'85	FY'86[d]	FY'87
Total Budget	$ 67,530	$ 75,122	$ 97,169	$ 106,608	$ 128,691	$ 142,741	$ 154,493	$ 168,767	$ 189,935	$ 206,496	$ 210,965
Salaries	35,404	39,828	48,640	49,426	56,390	63,183	70,039	73,353	83,988	92,854	102,077
Travel	5,722	8,618	11,480	12,349	16,513	17,186	16,785	18,891	21,604	30,088	23,412
Other Costs	15,250[a]	9,152	15,824	15,274	15,612	17,094	18,289	20,086	22,114	32,422	30,515
Computer Costs	-	-	2,955	7,969	9,207	10,689	10,680	9,746	7,924[c]	3,259	2,022
Overhead/Fringe	11,153	17,551	18,279	21,591	30,969	34,589	38,700	46,690	54,801	47,873	52,939
Overhead/Fringe as a Percentage of Salaries	32.0%[a]	44.0%	28.0%	44.0%	58.0%	54.7%	55.3%	65.6%	65.9%	51.3%	51.9%
FTE[b]	2.90	2.97	3.48	3.15	3.31	3.42	3.50	3.51	3.61	3.63	4.1
Salaries/pd FTE	11,881	13,640	14,634	15,691	17,665	18,873	19,785	21,556	23,849	26,225	24,624

[a] Fringe treated as other costs for 1976-77.

[b] Donated personnel deducted from FTE totals.

[c] Based on 15 RAPs; Indian Services RAP did not have a computer.

[d] During the 1985-1986 program year RAPs were funded for between 10 and 13 months so that all projects would be on the same funding cycle beginning with the 1986-1987 program year. All figures are averages of budgets prorated on a 12-month basis in order to provide the reader with comparable data from previous years.

Direct Salaries		$ 102,077
Fringe Benefit, @ 20.2% of direct salaries		20,624
Overhead @ 31.7% of direct salaries		32,315
Travel		23,412
Computer		2,022
Other costs		
Materials/Equipment/Supplies/ Conference Costs	7,529	
Reproduction/Printing	2,639	
Space Rental	3,803	
Communications	6,840	
Consultants, Contracted Services	7,718	
Other	1,986	30,515
TOTAL		$ 210,965

The salary line for this "typical" RAP supports 4.1 full-time equivalent (FTE) personnel. One of these would be a full-time coordinator and one would be a full-time secretary or administrative assistant. A part-time person is apt to direct the project. Other part-time staff are apt to add support to the project in the positions of trainer, resource specialist, or additional clerical help. All professional staff would be likely to have formal schooling in special education or early childhood development and experience either as a trainer, or with Head Start, or both. The average FTE salary for the staff is $24,624.

Overhead calculations follow a variety of formulae in cost proposals. For comparative purposes, we define overhead as a percentage of total direct salaries, reflecting widespread contract practice and federal agency convention. Fringe benefits are treated as a part of the indirect costs. For the "typical" RAP, the multiplier is 51.9 percent.

Travel costs for the "typical" RAP include in-region travel for staff, advisory committee members, and consultants, and costs for attending national RAP meetings.

The computer line item pays for the required hardware and softwre used by the RAPs.

Other Costs fall into five subcategories. Communication costs incorporate both telephone and postage. Materials, equipment, and supplies include purchase of resource library materials, rental of office machinery, office supplies, computer supplies, and expenses related to conducting conferences. This year nine RAPs specifically identified conference-related costs (food service, conference room and equipment rentals, and materials).

Reproduction and printing apply to media, i.e., brochures, films, slide presentations, pamphlets, or other duplicated documents. Consultants and contract services usually entail purchased expertise for workshop presentations or on-site training, but also occasionally include bookkeeping services, janitorial services, graphics, and clerical support.

Analysis of the 1986-1987 RAP Budget

The findings which follow are based on the funded budgets for 11 RAPs as displayed in Table 2.2, RAP Project Budgets, 1986-1987. Comparisons are made among RAPs and with the previous year. (Budgets used for the previous year are those prorated for 12-month period).

Total Budget:

- The budget for the RAP network declined by 30 percent this year, returning to the level of funding for FY 1983. Eight projects received cuts below their previous year's funding. Chapel Hill and Great Lakes, two of the RAPs to consolidate previous contractors' areas. rose by 19 and 50 percent, respectively. The budget for the University of Maryland, among the lowest last year, essentially remained the same (up by less than 1 percent).

  Chapel Hill served an area previously served by two RAPs at a funding level 39 percent beneath that of the two project budgets of the previous year combined. Likewise, the Great Lakes RAP operated on 29 percent less funding. SWHD and PSU served additional geographic areas, albeit at dramatically reduced work levels, with budgets 48 and 52 percents, respectively, below those of the combined contractors one year earlier.

- Overall allocations of funds into budget categories were similar to those of recent years. However, salary had a relatively larger share and travel had a relatively smaller share, as seen below:

	Percent of Budget	
	1986-1987	1985-1986
Salaries	48	45
Overhead	15	14
Other	15	16
Travel	11	15
Fringe	10	9
Computer	1	2

- Individual project budgets ranged between $152,598 at Region VII RAP to $249,577 at SWHD RAP, and averaged $210,965.

Salary and Staff

- The salary line for the RAP network totaled $1,122,848 in 1986-'87, averaging $102,077.

- In FY'87 the average salary line item rose by 10 percent.

- The salary line ranged between $76,219 in Mississippi to $143,942 at SWHD RAP. The salary line increased at six RAPs. At the Chapel Hill and Great Lakes RAPs, the salary line rose by 20 and 49 percents, respectively, to accommodate staff to serve three additional states at

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each RAP. University of Maryland and Texas Tech RAPs saw a 5 percent increase in their salary lines. NYU RAP had a slight increase of 1.8 percent over last year. The allocations for salaries declined at three RAPs: Region VII by 12 percent, SWHD by 4 percent, and New England by 1.8 percent. At three RAPs, the salary line stayed relatively stable. There was no change at the Mississippi RAP and an increase of less than 1 percent at Denver.

- The average FTE salary dropped from $26,225 in 1985-86 to $24,624 this year.
- The salary line supported larger staffs at individual RAPs, 4.1 FTE this year compared to 3.6 last year. Staffing patterns varied from between four staff in New England to 12 at Great Lakes and 15 persons at SWHD RAP. Expanded service areas accounted for additional staff at some RAPs, but not all. Moreover, some of the consolidated projects had staffing at the same level as the prior year. FTE increased at seven RAPs: Great Lakes by (1.8), Mississippi (1.0), SWHD (.9), Chapel Hill (.5), Denver (.4), Texas Tech (.6), and NYU (.2). FTE decreased at Region VII (1.0) and New England (.4) and remained fixed at University of Maryland and PSU.
- Salaries at all RAPs fell within about $4,500 of the mean, except for Texas Tech where the average salary was about $8,500 over the mean.

Indirect Costs

- Indirect costs, that is, charges for overhead and fringe, totaled $582,327 for the network and averaged $52,939. The average indirect costs rose by about 11 percent over last year, commensurate with increases in the salary line item upon which indirect costs are calculated.
- Indirect costs comprise one quarter of the budget for the network.
- There is a wide range in practices determining indirect costs. SWHD had no overhead. When calculated as a percentage of salaries, the figures ranged from lows at SWHD (11.7%), Great Lakes (29.8%), and Region VII (33.6%) to the highest of 106.3 percent at PSU and 81.4 percent at New England.

Travel

- The travel line item was the hardest hit by budget cuts. Expenses for travel last year totaled $481,404 compared to $257,534 this year, a drop of 47 percent.
- The travel line item averaged $23,412.
- Every RAP except University of Maryland, Chapel Hill, Great Lakes, and Region VII RAPs realized cuts in the travel budget.

- Travel budgets were among the highest at Texas Tech ($42,274), Denver ($36,692), and Chapel Hill ($36,182) where geographic areas are extensive or grantees are numerous, or both. Lowest travel budgets were in New England ($9,960), NYU ($14,385), University of Maryland ($15,480), and SWHD ($16,725) RAPs.

Computer Costs

- The total allocation for computer costs for the network was $22,245.
- Costs related to the use of the computerized MIS system for the RAP network have steadily declined since FY'82. The support contractor for the MIS is no longer funded and hardware is paid for through long-term leasing agreements.
- Two RAPs, Great Lakes and Denver, had no allowance for computer-related costs. Others varied from $625 in New England to $5,250 at Texas Tech RAP, with the average cost being $2,022.

Other Costs

- Other direct costs include all remaining out-of-pocket charges for communications (telephone and postage), equipment, supplies, printing and reproduction, materials, consultants, contracted services (design work, custodial services, bookkeeping, etc.), space rental, and expenses related to conferences. Costs for these items varied at each RAP.
- "Other" costs for the network in FY'87 totaled $335,611, averaging $30,515 per RAP.
- RAPs differed widely in their budgeting practices for "other" costs ranging from the low in Denver, with an allocation of $12,712, to the high of $69,629 at SWHD. The latter RAP had two satellite locations boosting these costs to well over double the average, for space rental, consultant costs, conference costs, and telephone.
- All RAPs had a telephone budget. Most averaged in the range of $4,500. Denver and Region VII had lower budgets for telephone, less than $3,000. PSU, Texas Tech, and SWHD had telephone costs over $5,500.
- All RAPs had an allocation for postage, as a great volume of their requests are handled by the dissemination of media. The usual budget is between $1,000 and $1,650. Chapel Hill, University of Maryland, and NYU exceeded $2,500. New England had the lowest, under $1,000.
- All but two RAPs had an allowance for printing and reproduction, a cost ranging between $1,200 and $5,100 and averaging about $2,650.
- Not every budget clearly reflected an allocation for supplies, equipment, and library materials, but each showed some expenses in one or more of the categories. Where identifiable, the purchase of library materials ranged between $1,000 and $3,900, usually on the lower end. Supplies and rental or maintenance of equipment averaged about $3,600, where identified.

- All but two RAPs (Denver and University of Maryland) listed conference-related expenses ranging from $882 in Mississippi to $5,643 at NYU and averaging $2,900 for those who had these costs identified.

- Rental of office space was an identified cost for all RAPs except Chapel Hill, Texas Tech, Region VII, and PSU. Where rent was paid, the variance in charges was extremely broad, from $772 in Denver to $14,185 at SWHD.

- All 11 RAPs had budgets that included fees for consultants, usually for presentations at conferences and on-site training. The average $7,718 hid a broad spectrum of costs. Five RAPs ranged between $6,000 and $8,645 for consultants, with Denver and Great Lakes falling below this range. PSU and SWHD identified $13,300 and $17,325 respectively, for these costs.

The introduction to this report has described the organization, nature, and tasks of the RAP program. This chapter has summarized the financial resources allocated to the RAPs to enable them to carry out the work of assisting Head Start grantees to serve handicapped children in a wide variety of situations and locales. In the following chapters, the performance of the RAPs is assessed by their users and by the management support contractor.

III

OVERALL PERFORMANCE: THE HEAD START TELEPHONE SURVEY

Key to an assessment of RAP services is what the Head Start programs think of them. To the extent that program staff find RAP training and technical assistance to be timely, relevant, and substantive, the network is succeeding.

RLA has gone directly to Head Start grantees each year to find out what they think about RAP services. Using a telephone interview guide, RLA has learned the types of service programs received from RAPs, how satisfied they have been with the contacts and which have been most valuable, whether there have been problems related to the services, and how RAPs might improve. Respondents are also asked whether they have received any assistance in recruiting and serving severely handicapped children.

In 1986-87, changes occurred in the composition of the network and the timeframe. Changes due to the Gramm-Rudman-Hollings Amendment were discussed earlier. To recap, grantees which had previously been served by Nashville, Portage, Pacific, and Alaska RAPs were served by Chapel Hill, Great Lakes (formerly University of Illinois), SWHD, and PSU RAPs in 1986-87. Indian grantees continued to be served by Three Feathers Associates, but the management support contract did not include their evaluation this year. Telephone interviews were conducted with grantees from January, 1988 to March, 1988, and respondents were asked to recall contacts from January through December, 1987, i.e., the last half of their FY'87 program year, and the first three months of FY'88.

The telephone survey has been found to be a rigorous measure of RAP performance. RAPs have no control over the selection sample. Respondents are asked to recall the types of contact they had with RAP; file research is not necessary. The most salient services and impressions are thus most likely to be reported.

To maximize the collection of valid data, the following methodological safeguards are built into the telephone survey design.

- A random sample of Head Start programs is drawn, i.e., 21 cases per RAP.
- Interviewers conduct the interview with the Head Start staff person who is most familiar with the work of the RAP, usually the handicap coordinator. (Prior to the survey, each RAP forwards a list of the Head Start grantees in their service area to RLA. For each, RAPs identify a contact person, i.e., the staff person with whom they have the most contact.)
- RLA mails an advance letter to each program's contact person which identifies the questions that will be asked as well as the evaluation period.
- Interviewers use a standardized interview guide and are trained to record responses uniformly.
- The questions asked pertain only to the performance of the RAP project. No extraneous information is sought.

The substance of the interview has been kept essentially unchanged so that findings are comparable from year to year.

Sampling Information

A sample of 233 Head Start respondents was randomly selected from the lists of grantees submitted by each RAP. Twenty-one cases were selected for most RAPs. Twenty-two cases were drawn for NYU and Great Lakes RAPs. The New York City grantee did not appear in our random sample and was added. An extra case was drawn inadvertently in Great Lakes and was retained in the sample. See Table 3.1, Reactions of Head Start Staff to the RAP Projects, 1987: Numbers of Cases, Representation of Regular Contact, Frequency, Satisfaction and Problems. Interviews were conducted with 100 percent of the sample.

RLA addressed its correspondence and telephoned the RAP contact person at each program. In 190 cases, or 82 percent of the sample, the respondent was the RAP's contact person. When not, it was usually because the contact person was no longer employed by the Head Start program or because the original contact felt that another person was actually more informed about RAP's work. The original contact person was least likely to be reached at Texas Tech and Great Lakes RAPs. A lower rate of contact was made with the RAP designees than last year for University of Maryland, Chapel Hill, and Denver RAPs. This change appears to have had a deleterious effect on satisfaction scores for these RAPs.

Frequency of Contact

Interviewers coded responses which indicated more than monthly contacts as a "four," monthly contacts as "three," 6 to 11 contacts a year as "two," contacts one to five times a year as "one," and no contacts as "zero." On the average, RAPs maintained contact with their clients slightly more often than every other month (2.5). RAPs maintaining the most contact were Mississippi (3.2), PSU (3.1), and New England (3.0). Chapel Hill and University of Maryland had the least frequent contact with Head Start programs in their service areas in 1986-87 (1.6 and 1.7, respectively).

Satisfaction

Respondents rated their satisfaction with RAP services. To minimize interviewer bias, each assigned the RAP a score on a four-point scale. The highest rating was four ("excellent"). A score of three was "good," two was "fair," and one was "poor." Respondents sometimes used decimals (e.g., 3.5) to express their rating.

When interviewees are unable to respond to the question about satisfaction because they are unfamiliar with the activities of the RAP, responses are treated in one of two ways. Respondents who are unfamiliar with RAP due to insufficient contact are automatically assigned a score of one, i.e., "poor" satisfaction. Respondents who are unfamiliar with RAP because they are new to the job are excluded from computations so as not to penalize the RAP. Respondents who are familiar with RAP, but who prefer to use other resources, are also excluded from computations since this choice is not a negative reflection on

Table 3.1

REACTIONS OF HEAD START STAFF TO THE RAP PROJECTS, 1987:
Number of Cases, Representation of Regular Contact, Frequency, Satisfaction & Problems*

	New England	NYU	U. of Md.	Chapel Hill	Mississippi	Great Lakes	Texas Tech	Region VII	Denver	SWHD	PSU	All RAPS
Number of Head Starts Surveyed:	21	22	21	21	21	22	21	21	21	21	21	233
Proportion with regular contact as spokesperson:	95%	77%	76%	90%	95%	57%	52%	95%	86%	86%	90%	82%
Frequency Index 4=more than monthly; 3=monthly; 2=(6-11 x yr); 1=(1- 5 x yr); 0=never	3.0	2.6	1.7	1.6	3.2	2.3	2.9	2.7	2.1	2.4	3.1	2.5
Satisfaction "grade" (4.0 system):*	3.5	3.7	3.3	3.2	3.5	3.5	3.5	3.4	3.4	3.6	3.4	3.4
Problems:												
No	86%	100%	100%	100%	95%	95%	90%	95%	86%	81%	80%	92%
Yes	14	0	0	0	5	5	10	5	14	19	20	8

*Two cases (Great Lakes and PSU) where a respondent was too new to rate a RAP were excluded; three "Don't Know" cases (NE, CH, and PSU) were penalized due to insufficient contact.

RAP. This year, there were two cases (Great Lakes and PSU) in which the respondent was too new to rate RAP and three "don't know" cases (at New England, Chapel Hill, and PSU) due to insufficient contact from RAP.

The average satisfaction score for the network in 1986-87 (see Table 3.2, Comparisons of RAP Satisfaction Scores, 1980-1987) was 3.4, with individual RAP scores ranging from 3.2 to 3.7. Although this overall score is a slight drop (.2) from last year, it equals the level of 1983. Satisfaction with RAP services remains in the "good" to "excellent" range. The minimal downward shifts occurring at individual RAPs generally do not persist over time. For the most part, satisfaction scores that drop in one year usually increase or remain stable in the next year.

Table 3.2
COMPARISONS OF RAP SATISFACTION SCORES, 1980-1987*

RAP	Year								Changes
	1980	1981	1982	1983	1984	1985	1986	1987	
New England	3.5	3.4	3.6	3.7	3.4	3.6	3.9	3.5	-.4
New York University	3.3	3.4	3.6	3.5	3.7	3.6	3.4	3.7	+.3
University of Maryland*	(3.3)	(3.3)	(3.7)	(3.2)	(3.5)	(3.7)	3.8	3.3	-.5
Chapel Hill	3.6	3.5	3.5	3.7	3.6	3.6	3.5	3.2	-.3
Mississippi	3.4	3.5	3.2	3.8	3.7	3.8	3.7	3.5	-.2
Great Lakes	3.3	3.4	3.4	3.4	3.4	3.5	3.6	3.5	-.1
Texas Tech	3.2	3.3	3.5	3.5	3.2	3.2	3.3	3.5	+.2
Region VII	3.2	3.3	3.2	3.5	3.3	3.6	3.4	3.4	same
Denver*	(3.2)	3.2	3.3	3.3	3.4	3.6	3.9	3.4	-.5
Southwest Human Development*	(3.0)	(3.3)	(3.4)	(3.3)	(3.3)	(3.1)	3.4	3.6	+.2
Portland State University*	(2.8)	3.4	3.3	3.2	3.4	3.3	3.4	3.4	same
Average for all RAPs**	3.1	3.1	3.4	3.4	3.5	3.5	3.6	3.4	-.2

*The reader is reminded that the sponsorship of some RAP projects has changed throughout the years. Current contractors (listed in the first column) were not responsible for the scores from every year on this chart. Parentheses demarcate those scores which were attributed to previous contractors. Although the Denver RAP changed sponsorship in 1985-86, the same project director was in charge until September, 1987.

**Calculations for the average for all RAPs were based on the number of projects funded in a particular year.

Scores decreased at six RAPs, remained the same at two, and increased at three. The largest drop in scores occurred at Denver and New England RAPs. For both, lower scores seemed to reflect a perception of a decline in the availability of services which respondents had previously felt were more accessible. Lowest scores were found at Chapel Hill (3.2) and University of Maryland RAPs (3.3). Lowered grantee scores in Chapel Hill's service area corresponded to less direct contact with RAP as the RAP turned more frequently to the Specially Funded Coordinators (SFCs), (SFCs are Head Strat grantees funded by the regional office in Region IV to assist clusters of grantees to serve children with handicapping conditions) to reach grantees in a service area greatly expanded by the defunding of Nashville RAP. Among University of Maryland's respondents, the lower overall score also corresponds with less frequent direct contact with RAP.

The greatest increase (+.3) occurred at NYU RAP, and NYU also had the highest satisfaction score within the network. SWHD and Texas Tech showed increases of +.2 from last year.

Types of Contact

Interviewees described the types of contacts they had with RAP during the evaluation period. Except for data on specific training and technical assistance and on the RAP initiative to serve more severely handicapped children, which were prompted, information about types of contacts with RAPs was obtained without prompting.

The average number of types of contacts in 1986-87 remained at 4.3, exactly the same as the previous year. The types of contact are depicted in Table 3.3, Reactions of Head Start Staff to the RAP Projects, 1987: Types of Contact with the RAPs. The largest number of types of service was reported for Mississippi (5.5). Both NYU and PSU respondents also reported an average of five or more types of contacts. Interviewees in the service areas of Chapel Hill, University of Maryland, Great Lakes, Texas Tech, and Denver RAPs identified fewer than average numbers of types of contact. Compared to last year, numbers of contacts went down at six RAPs and increased at five.

Type of Contact	Percentage of Respondents	Change from '85-'86
Training	86	-4
Mass mailings	68	-2
Information exchange	54	+3
Materials	51	-4
Technical assistance	39	+3
"Other"	18	-3
LEA agreements	5	-3

The frequency of contact fell in five of seven categories. However, there were enough increases in other categories to balance these decreases so that the average number of types of contact did not change since last year. The rank order of types of contact changed little; the only changes involved "Materials' and "Information" which reversed positions.

Training remains the most frequently mentioned type of contact (86%). RAP training events have drawn a lot of attention to the network as they are designed to provide practical, timely information for administrative and teaching staff working every day with children with special needs. One hundred percent of those sampled in Mississippi and SWHD RAPs' service areas reported RAP training, as did 95 percent of those served by Chapel Hill (an increase from last year), and 91 percent on those served by NYU. Sixty-seven percent of the University of Maryland RAP's respondents had received training. (Respondents were prompted to recall whether they had received training from RAP.)

Table 3.3

REACTIONS OF HEAD START STAFF TO THE RAP PROJECTS, 1987:
Types of Contact With the RAPs*

Types of Contact	New England	NYU	U. of Md.	Chapel Hill	Mississippi	Great Lakes	Texas Tech	Region VII	Denver	SWHD	PSU	All RAPS
General:												
HS helped RAP	0%	5%	5%	9%	10%	19%	0%	0%	5%	10%	10%	5%
Info exchange	71	64	43	19	76	67	48	43	52	76	33	54
LEA agreements	0	9	5	5	29	0	0	0	0	5	5	5
Mail/newsletters	81	45	90	71	52	76	76	100	29	33	90	68
Materials	52	55	38	29	81	63	71	62	43	43	52	51
Specific HC	14	41	9	5	14	10	14	10	24	29	24	17
Periodic Phone	38	45	0	5	24	24	33	29	33	29	19	25
Needs Assessment	19	14	24	24	19	5	5	14	24	14	33	18
Meetings/T&TA:												
General meetings	57	50	9	38	38	29	24	48	43	33	57	39
Training by RAP	81	91	67	95	100	86	81	81	81	100	86	86
Training thru RAP	0	9	0	0	5	0	5	5	0	14	5	3
RAP tech assist.	43	55	29	14	62	14	33	33	43	57	43	39
Other contacts	24	27	5	0	43	10	0	0	33	5	43	18
No. of different types of contact	4.8	5.1	3.2	3.0	5.5	3.8	3.9	4.3	4.1	4.4	5.0	4.3

*Multiple responses; totals exceed 1.00. "No Contact" and "Don't Know" responses were available for use by the survey personnel. Note that respondents could cite more than 100%.

Mass mailings were next most frequently mentioned type of contact (68%). A number of RAPs sent their constituents a regular resource packet, covering topics like attention deficit disorders, PL 99-457, and working with developmentally delayed parents. Grantees also received legislation updates and training and meeting schedules.

Respondents at Region VII (100%), PSU (90%), and University of Maryland (90%) most frequently received regular resource packets from their RAPs. Denver and SWHD interviewees were least likely to mention mass mailings.

Information exchange was the third most common type of contact with RAPs (54%). Grantees learned from RAP about lists of referrals, trainings offered by other agencies, and pending state legislation, or let RAP know about the number of staff who would be coming to training, the name of a potential trainer, etc. Mississippi and SWHD RAPs most frequently exchanged information with grantees; the lowest incidence occurred in Chapel Hill's service area, where this type of exchange is handled primarily by the specially funded coordinators (SFCs).

Materials were cited by 51 percent of our respondents. Grantees asked for audiovisuals, books and articles on specific handicapping conditions for staff and parents, screening and assessment tools, and mainstreaming manuals, among others. The greatest number of requests came from grantees served by Mississippi RAP (81%) and Texas Tech (71%), where a large proportion were for the computerized IEP (TIP). The lowest level of materials requests were from Chapel Hill respondents (29%) who said they frequently made requests directly to their SFCs who went to RAP for the materials.

Technical assistance and general meetings were the next most frequently mentioned contacts (39%). Respondents asked for technical assistance when they recruited and oriented new handicap coordinators, decided how to report specific handicaps, facilitated the transition of special needs children, and needed to access specialized services. Frequently, help came in the form of an on-site visit from a RAP staff member. Respondents in Mississippi, SWHD, NYU, New England, Denver, and PSU service areas mentioned technical assistance more frequently than the average. Chapel Hill and Great Lakes grantees were least likely to mention this form of service. (Respondents were prompted to recall whether they had received technical assistance from RAP.)

Sharing fifth place was general meetings (39%). Head Start programs described RAP-sponsored handicap coordinator meetings, Head Start Association meetings, meetings with their SEA facilitated by RAP, the national Head Start meetings, and meetings of boards on which grantees have served with RAP on behalf of handicapped preschoolers. New England (57%), PSU (57%), and NYU (50%) most frequently had contact with interviewees at meetings; only 9 percent of the respondents from University of Maryland's service area reported general meetings.

Periodic phone contacts (25%) are the informal ways in which RAPs and Head Start staff stay in touch with one another. Calls maintain rapport, validate information, and allow an exchange of news. (Coders make distinction between information exchange and periodic phone contact by determining whether the purpose of the contact is to make a specific request or more to keep channels open.) This type of contact was noted by almost half of the respondents in NYU's catchment area (45%). At least one-third of New England, Texas Tech, and Denver RAP respondents had phone contact with RAPs.

The collection of needs assessment data was mentioned by 18 percent of our interviewees as a time when they would have heard from RAPs. One-third of the sample had participated in the needs assessment process with PSU RAP; only 5 percent of grantees at Great Lakes and Texas Tech RAPs had done so.

"Other types of contact were also mentioned by 18 percent. "Other" types of contact included RAP and Head Start grantees' collaborative efforts with SEAs or interdisciplinary groups on behalf of handicapped children, membership on Advisory Committees, census information collection, or canvass calls. Forty-three percent of the respondents at PSU RAP mentioned this type of contact, generally for the latter two examples; the same percentage of Mississippi respondents mentioned this type of contact, most frequently referring to instances when RAP helped them develop and implement transition plans with LEAs.

Seventeen percent of the sample said that RAP provided help regarding a child with a specific handicapping condition. This type of help was asked most frequently of NYU (41%), which has historically played this role. Grantees had questions about health impairments, Down Syndrome, asthma, spina bifida, and behavior problems, among others. Twenty-nine percent of the respondents at SWHD and 24 percent of respondents at Denver and PSU RAPs also mentioned help with specific handicaps.

RAP helped Head Starts to develop or implement agreements or transition plans with LEAs among 5 percent of our respondents. Most notably this occurred in Mississippi's service area where RAP facilitated transition meetings on-site or helped the program outline a tentative plan (29%). Head Start served as a resource to RAP in 5 percent of all cases. Great Lakes RAP (19%) has made a real effort to tap local program staff as presenters, hosts, members of committees, and peer resources in order to build in-house capability and expertise among Head Start grantees.

Least frequently mentioned was training arranged by RAP (3%). For the most part, RAP staff themselves have trained Head Start staff. This year 14 percent of SWHD clients explained that RAP arranged for a specialist to train on the difficult child, and in another case, on PL 95-457. One respondent explained that RAP shared the costs of a consultant with them.

Most Valued Services

Of all the services RAPs provided, respondents reported that training was the most valuable. As shown in Table 3.4, Reactions of Head Start Staff to the RAP Projects, 1987: Valued RAP Services and Suggestions, 55 percent of our sample mentioned training as the service they valued most highly. Second to training was "other" services, a category which includes RAP's availability and staffs' expertise/resourcefulness (49%) as well as opportunities for networking through handicap coordinator meetings, taking a lead in advocacy at the state level, and keeping programs abreast of legislative changes. A comparison with reports from the previous year is presented below.

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Table 3.4

REACTIONS OF HEAD START STAFF TO THE RAP PROJECTS: Valued RAP Services and Suggestions

	New England	NYU	U. of Md.	Chapel Hill	Mississippi	Great Lakes	Texas Tech	Region VII	Denver	SWHD	PSU	All RAPS
Valued RAP Services:*												
Training	57%	68%	70%	68%	38%	60%	38%	55%	48%	57%	50%	55%
Technical Assistance	10	32	20	5	14	5	14	5	14	24	5	14
On-site T/A	0	0	5	0	0	10	10	10	24	14	10	7
Referrals	0	0	5	11	5	0	0	0	5	24	10	6
Information	10	23	15	21	24	5	10	25	14	10	25	16
Materials	29	23	35	47	24	15	29	55	24	19	40	31
Other Services	57	55	30	5	29	70	33	60	57	71	75	49
Average Number of Valued Services Cited	1.6	2.0	1.8	1.7	1.3	1.8	1.3	2.1	1.9	2.2	2.2	1.8
Suggestions**												
Yes	62%	73%	38%	70%	24%	27%	48%	62%	52%	48%	80%	53%
No	38	27	62	30	76	73	52	38	48	52	20	47
Total	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

*See text for details on "other" valued services, which include multiple responses. Responses of "no valued service" or "don't know" are excluded from this tabulation; there was one each of the former at U. MD and R. VII RAPs and five "don't knows" at Chapel Hill, Great Lakes, and PSU RAPs.

**Responses of "don't know" were excluded in this tabluation; one occurred at Chapel Hill, another at PSU.

	1985-86	1986-87
Training	55	55
"Other"	45	49
Materials	30	31
Technical assistance	18	14
Information	10	16
On-site T/TA	7	7
Referrals	7	6

Training has consistently led the list. As can be seen, there were no major shifts from the previous year, nor, incidentally from the year before that. There was only a reversal in rank order between technical assistance and information, but percentages shifted very slightly.

On the average, respondents specified 1.8 valued services. Respondents in SWHD and PSU RAPs' areas, however, identified an average of 2.2 services as especially helpful.

Problems

Eight percent, or 19 respondents, had encountered a problem with RAP services. (See Table 3.1) This represented an increase of two percentage points, or one respondent, from 1985-86 findings. No problems were reported by NYU, University of Maryland, and Chapel Hill RAP respondents. Twenty percent (4 respondents) of PSU and 19 percent (4 respondents) of SWHD respondents reported difficulties. A higher than average number of problems were reported for New England (14%), Denver (14%), and Texas Tech (10%) RAPs.

Of the 19 respondents, two had received no response from RAP and two had felt that responses came too slowly. The location of a training event had made attendance difficult for one interviewee. One program wanted more contact, two thought their RAP's staff should be better informed (e.g., about American Indian Program Branch [AIPB] policies or about PL 99-457), and another was disappointed that the actual training did not deliver what a workshop flyer advertised. A respondent was disappointed that RAP no longer sponsored meetings for handicap coordinators. RAP's emphasis on urban programs was not helpful to one rural program. For other programs, problems included wanting a point of view other than RAP's at a training, questioning the use of migrant program statistics, and a misunderstanding about appearing on a RAP agenda. One program felt it had been obligated to attend a cluster training so that it would not be cancelled. Finally, three of the 19 respondents mentioned two or more problems with RAP services: 1) preferring personal contact to written information and not getting a response to a request; 2) the location of training was too far from one Head Start and the program heard about the event too late to arrange to go; and 3) RAP had not helped a program clarify its training needs, had turned down their request for a specific training and had not seemed to thoroughly understand the Head Start population.

Suggestions

When asked, 53 percent of respondents had specific suggestions for improving RAPs work (See Table 3.4.). PSU grantees made the most suggestions (80%), and those in Mississippi and Great Lakes RAP areas made the fewest (24% and 27%, respectively).

Grantees would like more on-site visits, or at least training which is held closer geographically, and more personal contact. There also appeared to be a call for better communication of the services RAPs can and do provide; although the network has now been in existence for 11 years, the need to maintain high visibility within its service areas obviously never diminishes for the RAPs. Programs also wished for more training and more (funds for) RAP staff so that the Head Start could receive more service. Requests were also made for more materials, more legislative updates, and the reestablishment of a newsletter where none exists. A few respondents suggested that the network add minority staff, and where geographically appropriate, Spanish-speaking staff.

IV

RAP TASKS: ANALYSIS OF RAP IMPLEMENTATION OF PROJECT TASKS

There are five tasks which historically have received the most attention from ACYF and from the network. The management support contractor treats these tasks in more depth during interviews with RAP staff and in the final report. This section begins with a discussion of these five tasks.

1. Provide support, services, and materials to mainstream handicapped preschoolers. Task records, the documentation of RAP's time intensive workload, are discussed first to provide an overview of the content of RAPs' work. Following the analysis is a description of RAPs' efforts to improve the capabilities of Head Start grantees to serve children with severe handicapping conditions. RAPs also describe ways in which they think RAP services could be more appropriate and services which they find to be ineffective or not cost-effective. This subsection ends with a listing of materials which were developed or revised in 1986-87.

2. Provide training to Head Start staff. The training which RAPs provided in 1986-87 is the topic of the next subsection. Data on the numbers of personnel and grantees trained are presented, as well as information about focuses of training, about training conducted jointly with other agencies, and about new and successful training practices. This is followed by the results of assessment questionnaires returned from trainees attending a sample of RAP trainings.

3. Facilitate collaboration. Collaboration is a third major focus of the network. RAPs' collaborative efforts are discussed first from the perspective of the State Education Agencies and then from the perspective of RAPs. RAPs efforts to facilitate collaboration between Head Start grantees and local education agencies, as well as other agencies are described. The subsection ends with a listing of changes in states affecting services to young children with handicapping conditions.

4. Actively participate in RAP task forces. Task forces are used by the network and ACYF to respond to current issues and needs. Subsection four describes the work of four task forces in the 1986-87 program year.

5. Maintain the RAPPLE Management Information System (MIS). The computerized management information system has been in place for six years. Subsection five discusses the RAPs' suggestions for the future of the MIS, their use of the hard disk, and monthly recording practices.

The remaining six tasks are discussed in the following order:

6. Establish contact with Head Start directors
7. Establish an advisory committee
8. Assist grantees with the annual survey
9. Maintain an updated resource provider file
10. Conduct needs assessments
11. Attend national RAP meetings

1. Provide Support, Services, and Materials

RAPs' primary responsibility is to support Head Start grantees as they recruit and serve handicapped children and their families. RAPs ranked this task as being of major importance. Services include training, technical assistance, the dissemination of materials, and sharing of information. RAPs are occasionally asked by public schools, resources providers, ACYF regional offices, and regional contractors for some of these types of assistance.

RAP Activities and Task Records

Day-to-day interactions with or on behalf of Head Start grantees are, along with training, the core of RAP services. RAPs are expected to document these exchanges all year and submit them to the evaluator at the end of the year for analysis. Some interactions are classified as ACTIVITIES; these are specific requests which require little time, and are completed as soon as a requested material is sent, a question answered, or a trainer arranged for. Interactions which are more labor intensive (for example, technical assistance), require more time, or continue over time are classified as TASK RECORDS. Each RAP records its activities and task records using standardized formats. For awhile both activities and task records were entered into computerized data bases. Because several RAPs have run into difficulty with their hardware, as many submitted paper records as sent computer disks holding these records.

While RAP contractors were required to maintain both activities and task records, evaluators reviewed only the latter. Data in this report are based on hand counts of 11 RAPs' task records. This section, then, is an analysis of the network's own descriptions of the services provided. The reader should note that although documentation is required, it does take up valuable time. Since the delivery of a service usually takes precedence over the documentation of it; all services are probably not documented, and the data reported here thus underestimate the actual level of effort RAPs expended.

During the evaluation period from August 1, 1986, through April 30, 1987, major findings included the following:

- Volume - 936 task records were coded, a decrease of 24 percent from the previous year due to the decision forced by the Gramm-Rudman-Hollings Amendment in FY'87 to fund 11 rather than 16 projects.
- Average - on the average, each RAP recorded 85 task records in the 1986-87 program year, an increase by 8 percent from the previous year.
- Types of task records - the most commonly recorded task records were training (41%), followed by other meetings (15%), and collaboration (10%).

An Analysis of Task Records

A task record may document one major time-consuming event, for example, a mass mailing, or it may include several events. A collaboration task record, for example, may document several meetings with an SEA needed to draft an SEA/Head Start agreement, plan a mailing of the agreement to all grantees, and conduct follow-up phone calls to Head Start grantees to survey their reaction to the agreement. Nine types of task record are defined in Figure 4.1, Definitions of Task Records.

A summary of task records by type for each RAP is given in Table 4.1, Classification of Task Records. By reviewing these numbers, one can quite accurately assess the network's emphases on particular tasks. Training, for example, was consistently and frequently documented by all projects; over 40 percent of the task records were for training. These data also reveal the priorities of individual RAPs, demonstrating varying emphases on collaboration events, mass mailings, technical assistance, etc.

Volume

Volume of task records had steadily increased since 1979, as can be seen below. RAPs recorded 936 task records during this nine-month evaluation period. As mentioned earlier, the reduction in volume was consistent with the shrinking of the network from 16 to 11 RAPs. Despite this drop overall, however, the average volume per RAP, did increase.

Year	Volume
1979	393
1980	700
1981	842
1982	1,015
1983	1,098
1984	1,004
1985	1,127
1986	1,225
1987	936

Texas Tech, Great Lakes, and Southwest Human Development RAPs had the greatest numbers of task records (119, 112, and 111, respectively). All three recorded a higher than average number of trainings. A large number of technical assistance records increased numbers at SWHD. At Texas Tech RAP, almost three times the average number of directors' meetings and twice the average number of mass mailings were recorded. An exceptionally higher number of special project task records and task records for directors' meetings were found at Great Lakes RAP. The fewest number of task records were recorded by University of Maryland and New England RAPs.

The average number of task records for the network rose from 77 in 1985-86 to 85 in 1986-87. This is the most objective indicator of the constancy of the network's level of documentation. However, some changes in numbers occurred among the RAPs. The number of task records increased at Mississippi, Texas Tech, Region VII, and Metro RAPs; numbers decreased at New England, NYU, and University of Maryland RAPs. No comparisons can be made with previous years for Chapel Hill, Great Lakes, SWHD, and PSU RAPs since this was the first year they had served incorporated service areas.

Figure 4.1
Definitions of RAP Task Records

Classification	Examples
Needs Assessment	The process of developing an appropriate form and collecting data on the handicap-related needs of Head Start programs.
Training	Training provided by RAP staff or paid for by RAP staff, conducted on-site or at a large workshop, and tailored to the individual needs of the participants.
Technical Assistance	Ongoing or intensive technical support to a new handicap coordinator; development of a plan for services to handicapped children; assisting Head Start staff to locate appropriate services for a blind child.
Advisory Committee	The process of selecting members for the RAP advisory committee and conducting the meetings.
Meetings	Presenting at, or attending, meetings of Head Start directors, RAP directors, professional societies, ACYF regional contractors, local handicap coordinators.
MIS	Implementing the RAPPLE recordkeeping system.
Collaboration	Ongoing efforts facilitated by RAP between Head Start and state and local education agencies, public schools, departments of health, etc., for the benefit of handicapped children.
Task Force(s)	Ongoing participation on one of the RAP networks' task forces.
Special Project	Mass mailings to Head Start programs or other user groups; the development of media; conducting research on RAP-related issues; participating in radio or television presentations; developing or maintaining a lending library of materials.

Table 4.1
Classification of Task Records

Content of Task Records	%	Total	NE	NYU	U of M	CH	MS	GL	TTU	VII	DENVER	SWHD	PSU	AVERAGE
Training	41	383	17	26	23	36	25	48	57	23	55	43	30	35
Collaboration	10	96	7	9	3	9	18	10	5	5	4	13	13	9
Mass Mailing	8	71	1	10	0	10	7	4	13	8	2	10	6	7
Technical Assistance	7	65	12	3	1	3	10	1	8	3	2	20	2	6
HS Director's Meeting	4	41	5	1	0	0	3	13	11	1	0	3	4	4
National RAP Meeting	2	20	0	2	2	2	2	2	2	2	2	2	2	2
Advisory Committee Mtgs	1	11	1	1	1	1	1	1	1	1	1	1	1	1
Other Meetings	15	140	6	8	13	21	23	10	13	12	12	14	8	13
Task Forces	2	15	2	1	2	1	0	1	2	1	1	1	3	1
NA	2	17	2	1	2	1	0	3	1	1	1	2	3	2
MIS	1	6	1	1	1	0	0	1	1	1	0	0	0	5
Special Projects	8	71	5	9	10	12	3	18	5	4	1	2	2	7
TOTAL	101	936	59	72	58	96	92	112	119	62	81	111	74	85

Types of Task Records

Services most frequently recorded were training events (41% of all task records). Training is particularly time and labor intensive, but is effective in reaching large numbers of people. Next in frequency among RAP tasks recorded were attendance or presentations at meetings (15%) and collaboration efforts (10%).

The distribution of task records by type for the past six years, below, shows relatively little change over the years. Technical assistance peaked in 1985-86 with SWHD's introductory site visit to each grantee, but has returned to normal levels.

	80-81	81-82	82-83	83-84	84-85	85-86	86-87
Training	20 %	17 %	20 %	23 %	44 %	38 %	41 %
Mainstreaming conferences	18	16	14	13	*	*	*
Presentations and "Other" meetings	12	20	15	15	12	12	15
Technical assistance	8	7	7	7	7	14	7
Mass mailings	9	7	9	9	10	7	8
Collaboration	11	8	8	10	10	9	10
Head Start directors' meetings	5	6	6	5	4	5	4
Advisory committee meetings	2	2	1	1	1	1	1
RAP Meetings	3	1	3	3	2	2	2
MIS implementation	0	1	1	1	1	1	1
Needs assessments	3	2	2	2	1	2	2
Task forces	3	4	4	4	2	1	2
Special projects	7	10	10	7	5	8	8

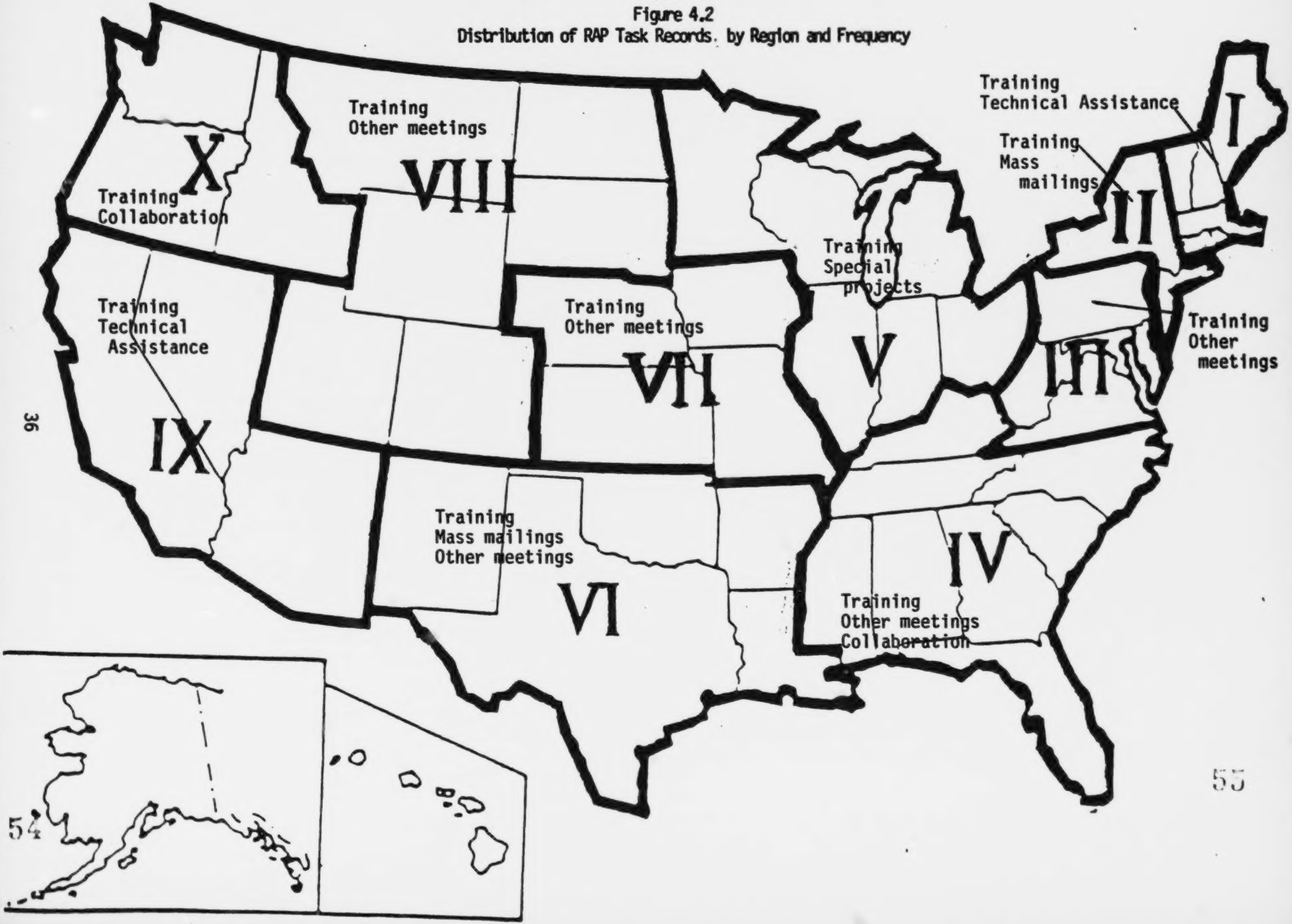
*Since 1984-85, mainstreaming conferences have been counted along with other training

As shown in Figure 4.2, Distribution of RAP Task Records by Region and Frequency, some variations occur from RAP to RAP. A more detailed description of each RAP's most frequent task records, as well as those having particular interest, follows. Because a chapter is devoted to training elsewhere in this report, examples of training task records are not discussed here.

New England RAP provided a wide range of technical assistance in Region I. Individual handicap service coordinators requested and received TA on record-keeping, developing effective arguments for providing services to younger handicapped children, and the recruitment, screening, and diagnostic processes. In Rhode Island, RAP worked with a Head Start grantee arguing a case for a child denied services by the LEA because her learning disability was attributed to cultural deprivation. RAP canvassed other states for the wording of laws, including PL 94-142, and explored arguments and precedents in a series of discussions with the Head Start. The final ruling was in favor of the child receiving services.

In another instance, New England RAP helped a Head Start conceptualize a program for teenage parents and their children in order to apply for available state monies. Together they defined quality infant care, parent education, completion of high school, and other appropriate adolescent experiences as key components.

Figure 4.2
Distribution of RAP Task Records, by Region and Frequency


X
Training
Collaboration
VIII
Training
Other meetings
VII
Training
Other meetings
V
Training
Special projects
I
Training
Technical Assistance
II
Training
Mass mailings
III
Training
Other meetings
IX
Training
Technical Assistance
VI
Training
Mass mailings
Other meetings
IV
Training
Other meetings
Collaboration

NYU RAP maintained frequent contact with their grantees through numerous mass mailings. Over the course of the year, RAP sent information about PL 99-457 and related meetings, a health publication list of available materials, and a training calendar. From grantees, RAP requested copies of all LEA/Head Start agreements in New Jersey to be shared with the New Jersey SEA. RAP also mailed information to its RAP colleagues on the Measures Battery.

RAP sought clarification for New York grantees of credentials required to provide speech and language services in Head Start. Staff talked with ACYF, a resource at the Newark Medical Center, and the New York SEA to clarify policy and laws. In the end it was decided to discuss the question at the summer RAP meeting as an issue to be raised with ASHA. Another technical assistance task record described RAP's ongoing research on accessing Medicaid monies to pay for related services to Head Start children in their programs. RAP called local and state-level providers and officials, and surveyed Head Starts programs, other RAPs, and the Regional Office for relevant information and research.

In Region III, RAP met with handicap coordinators in D.C., Pennsylvania, West Virginia, Maryland, and Virginia. Participants used these meetings to explore issues which arise during coordination with outside agencies, to discuss how to access services for diagnosis and therapy, and to share techniques for working with parents and staff.

University of Maryland RAP reviewed newly acquired materials and wrote brief descriptions of each to send to handicap coordinators. RAP also developed 13 pages of "Tips on Training" in a calendar format with the 1986-87 training schedule. Head Start grantees were surveyed to determine the kind and degree of collaboration which occurs among grantees and public schools. Results were compiled and printed as a Summary Report.

Chapel Hill RAP characteristically works hand in glove with the Specially Funded Cluster Coordinators (SFCs), a Region IV T/TA network which supports local Head Starts' handicap efforts. Chapel Hill RAP documented numerous meetings with SFCs in each of the seven states they serve. At these meetings, RAP and the SFCs planned mainstreaming trainings, discussed the roles of SFCs at the upcoming Health/ Handicap Conferences held throughout the region, planned for the reorganization of clusters, and explored issues surrounding the implementation of PL 99-457. Chapel Hill also held meetings with a project for visually impaired children to discuss collaboration with North Carolina Head Start programs.

In a major effort, RAP helped to arrange Health/Handicap Awareness Conferences in each of the states in their region. Staff invited SEAs to be presenters, coordinated with the ACYF Regional Administrator, mailed invitations, prepared materials and the agenda, and conducted the meeting and follow-up. These conferences were designed to provide an overview of Head Start health and handicap services and foster collaboration with state agencies and resource providers.

Mississippi RAP task records reflected a large number of meetings and transition planning sessions coded as collaboration. Meetings included state T/TA committee meetings, the national Head Start meeting, local Head Start meetings, and conferences on child abuse. This RAP served on and met with the Program and Eligibility Committee of the Mississippi Interagency Coordinating Council. They explored such issues as whether developmentally delayed, non-categorical, or deferred diagnosis should be used, different handicapping conditions, and the

Child Find screening process. Some of the responsibilities of the programming committee were to develop placement and program options, determine the length of programs, and define related services. The RAP also attended meetings for their own professional development, e.g., NAEYC, treatment of incest and child sexual abuse.

Region V had a high volume of task records on special projects. Great Lakes RAP developed a task force approach to problem-solving based on the national RAP task force model. In Indiana, the task force surveyed Head Start programs and mental health providers to determine what services grantees needed and what services mental health providers could offer. Based on the survey, a booklet entitled Guidelines for Mental Health Providers was developed. In Illinois, a task force was formed on serving emotionally and behaviorally disturbed children. Again, all programs were surveyed on services available and services needed. As a consequence of the findings, ACYF/Region V agreed to fund a training program around these issues for Head Start programs. Great Lakes RAP also developed a Region V Handicap Services SAVI in cooperation with the Regional Office.

Texas Tech RAP maintained contact with grantees through numerous mass mailings. "Monthly Resources of the Month" included information on several topics: AIDS, working with the gifted child, child abuse, recruitment and enrollment, learning disabilities, and visual and orthopedic impairments. RAPs also disseminated brochures on accessing RAP services, updates on PL 99-457, and a PIR profile. A high percentage of task records were on meetings. Of particular interest were planning meetings with Region VI public health officials to provide joint training on health services at upcoming mainstreaming conferences, as well as a meeting with the 20 Texas Education Service Centers to augment collaboration between local Head Start programs and the Centers and plan joint training at mainstreaming conferences. RAP hosted the national handicap coordinators' meeting in New Orleans; topics included updates on PL 99-457 and AIDS, and participants were able to discuss areas of common interest.

In Region VII, the bulk of task records related primarily to training, followed by other meetings. Staff from Region VII RAP took advantage of a number of opportunities to expand their own professional knowledge at conferences sponsored by other organizations. Meetings and presentations explored how the brain functions and responds when movement is encouraged, issues in early childhood education at the Kansas State CEC convention, and then at the national Division for Early Childhood (DEC), Council for Exceptional Children, conference, Burton White's theories about educating the infant and toddler, and strategies for working with emotionally disturbed children. RAP attended the National Handicap Coordinators' meeting in New Orleans and the initial meeting of a transition grant project in the Topeka, Kansas, public school system.

Denver RAP task records reflected attendance at numerous meetings. RAP served on an advisory board which offered direction to Metro State College Early Childhood Training Center. During these meetings members were advised on accreditation, workshops, and a professional development grant. RAP participated at two meetings with Head Start and the Rocky Mountain Adoption Exchange to discuss minority adoptions and Head Start families and to brainstorm ideas for a joint innovative grant. This RAP cooperated closely with the Regional Office and other T/TA providers by meeting with them often to keep them abreast of training dates and locations and issues of common interest and to explore opportunities for collaboration. RAP expanded on their own training skills by registering for a "Games Trainers Play" workshop and a conference of the American Society for Training and Development.

Southwest Human Development RAP made sixteen site visits to grantees in the region to provide technical assistance and provided phone technical assistance in four other cases. At one program, RAP problem-solved with the staff the diagnosis of learning disabled children and how to use a speech consultant. Questions around motivating an employee were also explored. In another instance, RAP attended a case conference on a child with a severe behavior disorder. At the same site RAP and staff discussed use of PA26 funds, core capability, budget planning for next year, and teaming across components. At a third site, RAP met with teachers, observed children, and gave suggestions for mainstreaming and recordkeeping. RAP on several occasions provided assistance with PA26 guidance, overviews of assessment policy and plans, service delivery plans, and managing the handicap component.

PSU RAP's major emphasis, in addition to training, appeared to have been collaboration. Task records documented efforts at both the local and state levels. Locally, RAP met with an Oregon Head Start grantee and LEA to facilitate the completion of evaluations and the process for transition and to set up procedures for the upcoming year. RAP met frequently with Idaho Health and Welfare Mental Retardation/Developmental Disabilities (MR/DD) personnel to facilitate collaboration between Adult Child Development Centers (ACDC) and Head Start. Plans were made to include ACDC Regional Directors and providers on RAP's mailing list. The MR/DD Bureau Chief agreed to meet with ACDC directors to urge their coordination with Head Start not only for mainstreaming placements, but also for training. RAP and MR/DD also met with each other to discuss 99-457 and Idaho SEA plans. In its role as a member of the Oregon State Board of Education Project Advisory body, RAP reviewed the wording of proposed legislation as well as a Carnegie grant to the state board of education to plan early childhood education for Oregon. Another task record documented the completion and signing of a collaborative agreement with Bureau of Indian Affairs (BIA). Subsequently, RAP and BIA implemented the action plan outlined in the agreement, which included sharing information about PL 99-457 and child counts, and attending meetings to keep abreast of issues of mutual concern.

Recording Practices

Evaluators read and counted each task record in the preparation of this report. It was clear that uniform coding and recording protocols, though still in place, are not being consistently followed. Following the work of the computer task force and ACYF's formalized commitment to a computerized recordkeeping system in the early 1980's, staffs have changed, hardware has become unreliable, and the reasons for maintaining the system have become clouded. Furthermore, there has been no formal mechanism for introducing new projects or new staff to the computer or RAPPLE, the network's recordkeeping system. The last training on the system occurred in 1985. In the day-to-day workings of most RAPs, it may be that recording an activity or making an entry is a major effort, so that uniformity or detail have become low priorities.

Evaluation staff have noted the following differences from the initial efforts to maintain uniform records:

1. Some RAP work is not being recorded as task records at some RAPs (e.g., MIS, training events).

2. Events which are technically part of a larger effort are sometimes being recorded as a separate task record (e.g., the mailing of copies of a new SEA agreement is recorded as a special project rather than as part of the ongoing collaboration task record with the SEA).

3. Coding definitions are not being observed (e.g., attendance at non-RAP conferences is coded as a conference rather than a meeting; or the task force category is used for non-RAP task forces where "meetings" should be used instead).

4. The definition of collaboration includes one-time meetings between agencies with no ongoing relationship.

5. The narrative on some task records is incomplete (e.g., a request for training is recorded but no description of the preparation for or delivery of it is provided).

6. Some narratives are too sketchy to know the purpose of the effort, who was involved, or what the outcome was.

7. Some descriptions of events do not match the task record type.

In sum, RAPs have continued to maintain task records, and, as in previous years, the level of effort has increased slightly. However, the quality of recording practices has not been maintained. The network will need clear guidance from ACYF on how to proceed if this situation is to improve.

Focused Efforts to Serve Children with Severe Handicapping Conditions

Project Head Start has qualified itself as a least restrictive environment appropriate for many children with severe handicapping conditions. RAPs are mandated to improve the capabilities of the Head Start grantees to work with more of these children than they have been serving. RAPs have seen theirs as a dual goal 1) to increase Head Start staffs' confidence in their own abilities to mainstream these children and 2) to increase community awareness of Head Start's capability. Every type of RAP activity -- training, technical assistance, materials dissemination, clarifying and reinforcing policy -- can serve both ends.

Information in this section is from two sources: the 233 Head Start representatives interviewed during the annual telephone survey and the RAP staffs. We begin with data from the Head Start telephone survey.

During the interviews, respondents were asked whether RAP had helped their program in any way in dealing with children with severe handicaps. See Table 4.2, Reactions of Head Start Staff to the RAP Projects: Contacts or Services to Severely Handicapped Children. Fifty-two percent had received this type of assistance; generally, the other 48 percent had other resources and did not need RAP's assistance, or had no children with severe conditions in their programs. Last year 62 percent had been helped by RAP in this manner, so a slight decrease in the frequency occurred this year. (ACYF has refrained from defining the term

Table 4.2

REACTIONS OF HEAD START STAFF TO THE RAP PROJECTS:
Contacts on Services for Severely Handicapped Children*

	New England	NYU	U. of Md.	Chapel Hill	Mississippi	Great Lakes	Texas Tech	Region VII	Denver	SWHD	PSU	All RAPS
Severe Handicaps:												
No Contact	81%	32%	48%	48%	43%	64%	52%	43%	52%	33%	33%	48%
Contact	19	68	52	52	57	36	48	57	48	67	67	52
Total	100	100	100	100	100	100	100	100	100	100	100	100
Contact Type:												
Information	25	27	00	00	08	25	30	33	30	21	21	20
Materials	25	73	91	36	33	50	70	67	00	43	86	55
T/A	25	47	18	00	33	13	10	08	50	07	14	21
Training	25	20	18	55	33	00	20	17	20	43	21	26
Others	00	07	00	09	00	25	00	00	00	14	00	06
Total	100	173	127	109	108	113	130	125	100	129	143	127

*Distribution of types of contact allows only for those who had RAP contacts on these topics. Multiple responses (more than one type of contact) may have been experienced.

severely handicapped beyond such possible indicators as multiple handicaps and the increased amount of special services neded. Therefore, interviewers used this definition when asked by respondents to define the term.)

Of those helped by RAP, 55 percent had received articles or monthly resource packets addressing severe handicaps, 26 percent had received training, 21 percent had received technical assistance, and 20 percent had obtained information from RAP. Respondents served by New York (68%), SWHD, and PSU RAPs (67% each) were the most likely to have received help from RAP as they recruited and served severely handicapped children.

The RAPs' efforts to improve the capabilities of grantees fell into five categories: training, special projects, information/advocacy, technical assistance, and periodic mailings.

NYU, University of Maryland, Chapel Hill, and Great Lakes RAPs held sessions on serving the chronically ill child. NYU and Maryland RAPs also presented on the needs of families of severely handicapped or ill children. NYU RAP included as a presenter the mother of Alyssa, a child with orthopedic impairments who got her own start in Head Start. The other RAPs which presented related training topics are as follows:

New England:	Health
U of Maryland:	Attention deficit disorders Coping with health/handicap issues through dramatic play
Chapel Hill:	Severely burned children
Great Lakes:	Adaptation of the classroom environment, staff attitudes
Denver:	Severe handicapping conditions

Among its special projects, NYU completed "Alyssa," a videotape about an orthopedically impaired child mainstreamed by Head Start and later by the public school. Following the RAP's efforts to circulate it among broadcasting companies, it was aired on WCBS in New York in August, 1986. Chapel Hill co-sponsored a Health/Handicap Awareness conference in each state to introduce state level providers to the Head Start capability in serving children with severe health and handicapping conditions. Mississippi RAP, whenever invited, facilitated meetings between grantees and LEAs to formalize the transition of children from Head Start to public school. They used these opportunities to discuss program options, and where appropriate, dual placements. Great Lakes developed a task force on emotional/behavioral disturbance to address prevention issues. Region VII documented the work of a grantee which had enrolled twin boys with cerebral palsy and disseminated it as a publication.

RAP staff have traditionally served in the role of advocates and information brokers. In this capacity, NYU encouraged families to apply for funds for services the Head Start programs could not otherwise have provided through Family Court, a process unique to New York State. Similarly they urged grantees to make specific needs for services to severely handicapped children known to the Regional Office, and advocated the admission of a child into a program; as a result, ACYF concurred and provided extra funding for the child. Mississippi RAP served as a liaison between Head Start and Health and Welfare departments, sharing information on the location of centers, and referral procedures. RAP followed up to explore ways in which specific children could be served. They also reminded Head Start programs of funds available through the Regional Office for serving this population and disseminated the MESH directory, a listing of all services available to handicapped children in Mississippi. Region VII produced several materials on severe handicaps as well as acquiring new materials for their lending library, especially on health impairments and mental retardation. SWHD alerted grantees that the Regional Office would be looking carefully at the PIR to determine the types of children being served and to encourage grantees to recruit previously diagnosed children.

All RAPs were available to provide technical assistance to programs working to enroll and serve severely handicapped children. For example, Chapel Hill asked for clarification from ACYF on specific strategies for recruiting and serving severely handicapped children in a mainstreamed setting; ACYF responded with a written memo which the RAP disseminated. Chapel Hill also provided technical assistance for a Head Start integrating a blind child into the classroom. Mississippi RAP worked successfully over a period of time to mainstream a severely and multiply handicapped child into Head Start, finally succeeding by helping all participants to focus on the child first as a child with a child's needs. Denver RAP provided on-site technical assistance for a child with pica and, in another case, for a child experiencing the after-effects of having fallen into a well. SWHD, like so many RAPs, tried to help grantees define severe handicapping conditions so that relevant training could be offered.

Periodic mailings were another way in which RAPs enhanced Head Start staffs' capabilities. Each of University of Maryland's "Resource Files" provided a fact sheet on a specific handicapping condition, a resource list, a summary of the current research on the topic, classroom ideas and materials for teachers, and specially designed handouts for parents. Topics during the 1986-87 program year were Down Syndrome, birth defects, the effects of lead, alcohol and drugs on children, and attention deficit disorder. Chapel Hill disseminated materials on severe handicaps through "RAP Aids." TTU sent out materials on working with severely handicapped children in several editions of "Resource of the Month." Denver compiled packets on deaf/blind impairments, autism, and Praeder Willis syndrome. Finally, PSU RAP's "RAP Source" contained information on emotional and behavioral problems, orthopedic impairments, attention deficit disorder, and management of emotional and behavioral problems.

Ways in Which Services Could be More Appropriate

RAP staff's ideas were solicited on whether the network or their individual services could be made more appropriate to meet the needs of grantees. Three projects believed services would be improved if RAPs were to provide on-site, hands-on training and technical assistance. It was suggested that more follow-up would reinforce the information being transmitted through training. It was also suggested that a return to longer, more intensive training, possibly with credit, would be an improvement. One RAP suggested that RAPs share all materials they develop or discover and share expertise to reduce the cost of hiring consultants.

Several responses admonished the network against losing touch with their constituents: i.e., not to get "too slick" or sophisticated; they suggested increasing attendance at Head Start Association meetings, state level network meetings, and cluster trainings and spending time in local centers to remain aware of the pressures and constraints on local Head Start programs.

Among ideas for useful materials were a directory of all Head Start handicap coordinators and a network-wide RAP catalogue of resources. A suggestion was made to resurface and revise early RAP materials. Two RAPs noted a need for more materials and information on pediatric AIDS and another identified a need for in-depth information on PL 99-457 and handicap regulations.

There was a suggestion that if RAPs promoted more networking among handicap coordinators through regular meetings, it would strengthen their voice. Another suggestion was that RAPs themselves assume a public relations role for Head Start.

Aside from suggestions for the network, RAPs had thoughts on how to better serve their own grantees. One would develop training for trainers on integration of components, individualized teaching techniques, and training skills (Great Lakes RAP). Another would work more closely with migrants and with SEAs (TTU RAP). The RAP in Region VII hoped to augment services to grantees by encouraging their use of Region VII clearinghouse materials through the insertion of request forms in conference packets and newsletters.

Ineffective Services or Services Which are not Cost-Effective

RAPs also responded to an optional question as to whether any services were ineffective or not cost-effective. Both the Mississippi and Great Lakes RAPs noted that cutbacks in budgets and staffing in their respective regions had reduced effectiveness. Chapel Hill RAP noted that being stretched thin had shown up in small oversights which affected service delivery; they would also like to find local consultants so that services could be delivered more effectively to two Indian programs in Florida. Great Lakes RAP found that one Advisory Committee meeting a year was less effective than two; they would also like to improve their provider file. Texas Tech RAP believes the management information system needs to be updated to save time and to document RAPs' efforts accurately. Region VII RAP finds that brief, isolated training events only scratch the surface of grantees' training needs.

Materials Developed or Revised in 1986-87

Each year the RAPs generate articles, handouts, resource files, media, newsletters, and materials in support of the training and technical assistance they have designed and provided to grantees. The following were developed or revised by the RAP network in 1986-87 to meet program needs:

Directories

Annotated bibliography on media (NE)
Directory of grantees and component staff in Mississippi (MS)
Handicap services directory (MS)
Materials catalogue (Denver)
MESH Directory update (MS)
Resources for migrant Head Start programs (TTU)
Resource guide of materials available from RAP (UMD)

Media and Written Materials

"Alyssa" videotape and training exercises (NYU)
Head Start/Public School Collaboration in Maryland (UMD)
PL 99-457 (CH)

Transition slide tape and curriculum for kindergarten teachers (CH)
Transition planning process slide tape and curriculum (CH)
Orientation packet for new directors and handicap coordinators on the handicap component in Head Start (UMD)
Mental Health Booklet (GL)
Videos for traditional and non-traditional values associated with having a disabled child in native American cultures and ways parents and professionals can reorganize and develop strategies to help (SWHD)
"Staff Development and Support," "Program Planning and Implementation" - rewrite of two chapters in the ECE Special Education Resource Guide (SWHD)
Transitional Planning booklet (MS)
"Up I Grow: How Your Child Develops, Birth to 5 years (SWHD)

Newsletters

"Newsbreak" articles (CH)
RAP-Up section "T/TA datelines" (UMD)
Regular column on supervision for the Maryland Council on Exceptional Children's newsletter (MD)

Needs Assessments

Community needs assessment (SWHD)
Handicap training needs assessments (UMD)

Resource File Topics

Adaptations and modifications (PSU)
Attention deficit disorder (UMD, PSU)
Birth deficits (UMD)
Developmental delay (PSU)
Down's Syndrome (UMD)
ESL, Speech and language (PSU)
Fetal Alcohol Syndrome (NE)
Identifying children with special needs (PSU)
Intellectually impaired parents (PSU)
Lead, alcohol and drugs (UMD)
Management of emotional and behavioral problems (PSU)
Orthopedic impairment (PSU)
Parent support, involvement, and assistance (PSU)
Perceptual motor skills (PSU)
PL 99-457 (NE)
Resource of Month (9) (GL)
Self-esteem (PSU)
Social/emotional development (NE)
Transition (PSU)

Training Materials and Handouts

Management of emotional and behavioral problems (Denver, PSU)
Motor perceptual development (VII, Denver)
Medications (VII)

Emotional disturbance (VII)
Mental retardation (VII)
Developmentally delayed parents (VII)
Screening and assessment (VII)
Learning disabilities (Denver)
Working with parents (Denver)
Speech/language handouts translated into three southeast Asian lanuguages (SWHD)

Miscellaneous

Applicable Handicap Guidelines (TTU)
Education survey for PCCs to assist with new diagnostic criteria for infants (SWHD)
Handicap Services SAVI-Region V (GL)
Identifying the Child at Risk for Learning Problems (VII)
Region III State Implementation Plans for PL 99-457 (UMD)
Revised Spanish SUCCESS screening instrument (TTU)
Training calendar (GL)
Transitioning guide for Ohio (GL)

2. Provide Training to Head Start Staff

Training has been part of the RAPs' workscope since 1978. Of the 11 RAP contract tasks, this has perenially been the most time consuming and expensive, requiring continual innovation to design creative and cost-effective training approaches. The statement of work designates training as a program area deserving "particular attention." The network ranked training as a task of "major" importance. In planning for the 1986-87 program year, each RAP included at least one goal related to this task among its overall goals; these goals were associated with special topics, audiences, or planning decisions.

The contract requirements for RAP training underwent a significant change in the 1984-85 year. The definition of training was broadened. No longer was a distinction made between mainstreaming training and all other RAP training for the purposes of contractual accountability. After seven years of operating under one set of guidelines, the target audiences, formats, and the training subject areas were formally broadened to be more inclusive. These changes had actually been taking place over the years. While remaining well within the boundaries of the contract, RAPs had been slowly changing direction in response to individual grantees' training needs. Thus, by the 1984-85 program year, the written requirements delineating the RAP training task had caught up with actual practice.

RAPs held statewide conferences, small cluster conferences, on-site workshops, and co-sponsored events. Each of these modes of training delivery offered particular advantages. State conferences, for example, ensured that training was made widely available. Cluster conferences, on the other hand, targeted a regionalized training need. On-site delivery of training for one grantee is certainly the most responsive approach, but it could also be the costliest model. At the other extreme, joint conferences stretched resources the furthest while at the same time building rapport among professional groups and fostering continued cooperation. RAPs selected combinations of these approaches to meet varying circumstances and needs in their service areas.

Training was planned for one or more days and consultants, Head Start staff, or RAP staff were used as trainers. Usually one or more of the handicapping conditions was selected for in-depth discussion.

RAP training focused on a number of topics or audiences depending on the results of assessments. These included: instruction for Head Start staff and staff from other agencies providing educational or developmental services to preschool children with handicapping conditions; instruction for Head Start directors, handicap coordinators, other component coordinators, and additional staff in areas which relate to the development and effective management of the handicap efforts within a Head Start grantee; instruction for Head Start staff and others to work more effectively with resources; child abuse; and the delivery of services to preschool children with a handicapping condition and their families.

Although the variation allowed by the new specifications on training led the RAPs in some new directions, the main audiences and topics did not change radically. Head Start staff remained the RAPs' primary target population, although as resources allowed, RAP training was extended to staff from other agencies serving handicapped children.

Some of the 1986-87 data can be compared only to data from the previous two years. Modifications in 1984-85 changed both the measures used for the evaluation of RAP training and the way data were collected. As a result, all RAP training is counted, whether an event is a "mainstreaming conference" per se or not. ACYF also dropped its requirement for an unduplicated count of trainees. While these changes simplified the paperwork for the RAPs, comparability of data was foregone. The data which ACYF now receives are a better measure of the level of training effort expended by the RAPs (i.e., how many people attended training) than how many Head Start staff have received RAP training.

An additional change which affects comparability with data from past years was the loss of four RAPs from the network. Moreover, the exclusion of the Indian Services RAP from the evaluation further reduced the total number of RAPs reported on this year to 11 compared to 16 in past reports.

Participants of RAP Training

The RAPs conducted 421 training events in the 1986-87 program year. Relative to last year, RAPs increased their average number of training events from 33 to 38. Table 4.3, Participation in RAP Training, shows that SWHD RAP conducted the greatest number of trainings (68 events). Great Lakes (55), Texas Tech (54), Denver (51), and Chapel Hill (46) also conducted more than the average number of trainings.

Table 4.3 Participation in RAP Training

	No. of Training Events	Grantees Attending (%)
New England	22	96 %
NYU	27	99
U of Maryland	23	94
Chapel Hill	46	93
Mississippi	24	100
Great Lakes	55	88
Texas Tech	54	93
Region VII	23	99
Denver	51	90
SWHD	68	98
PSU	28	93
TOTAL	421	94 %

The second column of Table 4.3 shows that the RAPs were successful in reaching 94 percent of the Head Start grantees through training this year, an increase of 1 percentage point over the coverage achieved in the previous year. Five of the eleven RAPs trained over 95 percent of their grantees, and no RAP reached less than 88 percent of its grantees. It bears repeating that this level of coverage was achieved despite consolidation within the RAP network.

Nationwide, 26,613 people were trained by the RAP network in 1986-87, as shown in Table 4.4, Recipients of RAP Training. The reduction in the number of RAPs accounted for the drop of 2,619 in the numbers trained from the previous year. Actually, a comparison of the average numbers trained showed that the RAPs dra-

Table 4.4
Recipients of RAP Training

	Head Start Trainees				Non-Head Start Trainees	Total Number of Trainees
	Teaching Staff	Others	Unspec.	TOTAL		
New England	1,159	581	--	1,740	88	1,828
NYU	1,072	1,294	--	2,366	14	2,380
U of Maryland	293	391	--	684	95	779
Chapel Hill	1,595	1,957	--	3,552	427	3,979
Mississippi	591	1,106	--	1,697	364	2,061
Great Lakes	1,946	1,379	--	3,325	915	4,240
Texas Tech	2,415	1,451	--	3,866	298	4,164
Region VII	770	361	255	1,386	494	1,880
Denver	630	362	--	992	173	1,165
SWHD	1,793	1,094	--	2,887	486	3,373
PSU	337	254	--	591	173	764
TOTAL	12,601	10,230	255	23,086	3,527	26,613
AVERAGE	1,146	930	23	2,099	321	2,420

matically increased their training efforts from the previous year from an average of 1,827 to 2,419 trainees. This increase of trainees and events was all the more impressive since Gramm-Rudman budget reductions were also in effect.

Table 4.5, Distribution of RAP Trainees, translates the raw data on the types of personnel trained by RAPs from Table 4.4 into percentages and provides a closer look at the composition of trainees according to their affiliation and position.

A total of 23,086 Head Start staff were trained as well as 3,527 non-Head Start personnel. Overall, RAP trained Head Start staff at a ratio of about 7:1 compared with non-Head Start personnel. Despite an overall decrease in numbers trained, due to the decrease in the number of RAPs, one segment of the trainee population actually grew: non-Head Start personnel. The number of non-Head Start staff trained rose 23 percent from 2,875 to 3,527. Great Lakes RAP trained the largest number of non-Head Start staff (915). Proportionately, Region VII trained the most non-Head Start staff (26% of trainees were non-Head Start staff as compared with 13% overall). The NYU, New England, and Texas Tech RAPs trained lower proportions of non-Head Start staff.

A total of 12,601 Head Start teaching staff were trained (this category includes teachers, teacher aides, and home visitors). Teaching staff represented more than half of all Head Start trainees. New England and Texas Tech RAPs' training attracted the highest proportions of teaching staff, as did the Denver and SWHD RAPs. A notable exception to this trend was the Mississippi RAP for whom teaching staff were only 35 percent of all Head Start trainees.

A total of 10,230 administrators and other non-teaching Head Start staff also received RAP training. The shift toward training more directors, handicap coordinators, and other component coordinators has steadily continued as recognition has grown of the critical role played by supervisory staff in the support of the handicap component.

Focuses of RAP Training: Special Topics and Target Groups

All RAPs had at least one topic which they identified as a special focus of the year's training efforts. A common topic on RAP training agendas was PL 99-457, the Federal legislation affecting services to infants and young handicapped children. The Education of the Handicapped Act, as amended, is so far-reaching that its implications for Head Start have raised a great deal of interest nationwide. This topic was a particular focal point for six RAPs (U of Md., Chapel Hill, Mississippi, Great Lakes, Texas Tech, and Region VII RAPs).

Another topic of widespread interest was behavior management, requested perennially by grantees. Among the several different aspects of this subject which were addressed by RAPs this year were: behavior management techniques; distinguishing between discipline problems and emotional disturbance; hands-on strategies for day-to-day discipline; and diagnosis of preschool-aged children.

Table 4.5
Distribution of RAP Trainees

	Head Start				
	Teaching Staff	Others	Unspecified	TOTAL	Non-Head Start
New England	63 %	32 %	-- %	95 %	5 %
NYU	45	54	--	99	1
U of Maryland	38	50	--	88	12
Chapel Hill	40	49	--	89	11
Mississippi	29	53	--	82	18
Great Lakes	46	32	--	78	22
Texas Tech	58	35	--	93	7
Region VII	41	19	14	74	26
Denver	54	31	--	85	15
SWHD	53	33	--	86	14
PSU	44	33	--	77	23
TOTAL	47 %	38 %	1 %	87 %	13 %

Specific handicapping conditions comprised another set of typical training topics; various health impairments had special urgency. In response to needs assessment data, for example, the New England RAP included information on rare low-incidence disabilities. The Great Lakes, Region VII, and Denver RAPs focused attention on chronic illnesses at many conferences. A workshop designed by the Region VII RAP educated trainees about medications. This session touched on the related subjects of generic drugs, safe use of drugs, side effects of drugs, and the problem of drug interaction as well as differentiating between various types of allergy/cold medications and providing important information about aspirin/tylenol, heart medication, anti-epileptics, asthma medications, stimulants, and antibiotics. Otitis Media was the subject of workshops conducted by Chapel Hill. Region VII presented workshops on learning disabilities and mental retardation.

In addition to the special topics common to many RAPs -- PL 99-457, behavior management, and specific handicapping conditions -- the following were topics given emphasis by individual RAPs:

> The healthy emotional and social development of young children was selected by the New England RAP as a theme for its state conferences.
>
> The title of many of NYU RAP's conferences was "Meeting the Challenge of the Child with a Severe Impairment." These included workshops titled "Mainstreaming Alyssa - A Head Start for Life," "Help for the Child Who is 'Tearing Up' Your Classroom", and "Attention Deficit Disorder".
>
> The University of Maryland RAP trained staff specifically for working with parents of children with special needs.
>
> Chapel Hill used "Seasons of Caring," a film about families with young children with chronic illness, at many state conferences.
>
> Mississippi RAP conducted training on transition.
>
> Texas Tech RAP provided training to all Region VI grantees on the completion of the PIR.
>
> Region VII included workshops on working with developmentally delayed parents.
>
> Denver RAP offered several workshops which focused on "subtle handicaps," including short attention span, sensory-motor difficulties, and inability to follow directions.
>
> SWHD RAP made a concerted effort to provide teacher training with a particular focus on hands-on, practical approaches with immediate application to the classroom.
>
> PSU RAP continued to offer its behavior management workshop to teams of people from Head Start programs who agree to carry out a follow-up plan afterwards.

Special groups are targeted by RAPs each year as well as special topics. The primary target populations remained Head Start teaching staff and handicap coordinators. For example, the University of Maryland RAP not only trained handicap coordinators in each of the six states it serves, but also focused on their needs in sessions at several large conferences. The NYU RAP held a three-day training event for both new and veteran handicap coordinators. Health/handicap personnel were targeted by the Chapel Hill and Mississippi RAPs (although non-Head Start health personnel were included). Both the Great Lakes and Texas Tech RAPs targeted migrant Head Start staff. The Great Lakes RAP also planned training for Cambodian families. In an attempt to increase its regional coverage, the Region VII RAP specifically aimed to get those grantees to its training which had not attended in recent years.

The New England and NYU RAPs designed their training to address different levels of expertise represented in their Head Start audiences. The Denver RAP searched for a new way to provide the in-depth training desired by a large urban grantee; a solution was found for approximately 25 staff. One day each month this group met with RAP to receive intensive training. In addition to these monthly seminars, each participant qualified for one hour of individualized classroom observation and technical assistance from RAP staff focusing on either a child in the classroom or on a particular technique.

Grantees Receiving No Training

Only 6 percent of the 1,249 grantees served by the 11 RAPs did not send staff to RAP training in 1986-87. Some of these 78 grantees never have attended RAP training for one reason or another. A number were Indian Head Start grantees. Although all of the reasons for the lack of attendance were unknown, for many of these grantees scheduling conflicts and internal program difficulties continue to be common causes (e.g., lack of staff, staff turnover, and administrative changes in the program). Other known reasons included insufficient funds for travel and bad weather.

New and Successful Training Practices

Each year the RAPs must offer basic and advanced training on mainstreaming as well as find new methods of presentation. To be responsive to grantees' needs and interests, the RAPS must also solve problems associated with shrinking budgets in the face of increasing demands for services. When asked to relate some of this year's new and successful training practices responses clustered into two general categories: planning and training approaches.

Regarding planning, the Great Lakes RAP hired a conference coordinator this year to plan its events. The Region VII RAP used consultants much more often at its trainings which "freshened" the presentations of basic workshop material and made it possible to offer greater depth to the training. The Region VII RAP also had access to the University of Kansas airplane which made travel easier for them and their consultants. Although it required very early planning to book it, the use of the airplane was both cost effective and a time-saver. Since travel by plane can be done the very morning of a training event, RAP staff could make an up-to-the minute decision if bad weather threatened cancellation of a training event. They would not need to travel needlessly and could also inform participants to stay home. The New England RAP increased attendance at its state conferences by holding only one conference per state. The Region VII RAP increased attendance at the large annual conferences held in Nebraska and

Missouri by sending a special flyer inviting all Head Start programs in the states of Kansas and Iowa.

RAPs also tried new training formats to deliver their training and many were very successful. Chapel Hill refitted important material on IEPs into a new format; this session relied on a case study approach which led participants through the process of using developing a lesson plan for a child based on actual assessment results and an IEP. A peer exchange session specifically for handicap coordinators was scheduled by the University of Maryland RAP at its regional conference. The Great Lakes RAP developed training agendas through a "call for papers" announced to all Head Start programs.

The University of Maryland RAP held a Train-the-Trainer Institute for handicap coordinators. At Head Start Association meetings in Region V, the Great Lakes RAP used a "roundtable" format to encourage discussions and answer questions on handicap-related issues. Relevant handicap issues in Region V were also tackled by task forces staffed by Head Start personnel. The use of bilingual consultants and also the inclusion of parents of handicapped children as conference speakers were practices well-received by SWHD RAP trainees.

The Texas Tech RAP produced a guide and a checklist on Head Start handicap policies for use by Head Start personnel. As a follow-up to training on behavior management, the Mississippi RAP made extensive use of videotaping. The Denver RAP held four special days of training, called "Colorado Topic Days," at various locations across the state; the topics of these sessions, which were open to all Colorado grantees, were IEPs, communication, behavior management, and sexual abuse of children. In addition, the Denver RAP held eight monthly training days for a regular group of teaching staff at the large Denver grantee as a way of being responsive to their need for in-depth, extensive training. Aiming to promote professional growth among local handicap coordinators, the SWHD RAP paired new and veteran staff in the same locales. The PSU RAP used conference calls to maintain contact with handicap coordinators in Alaska, since it did not have funds to travel to meet with them personally.

Joint or Co-sponsored Training

In their scope of work, the RAPs are strongly advised to provide training in conjunction with other agencies and groups. In response, RAPs collaborated with a wide variety of professional organizations, state and regional service providers, universities, and various Head Start-affiliated groups. In fact, one in four RAP training events this year was co-sponsored.

The primary benefits cited for co-sponsoring training were the collaboration it fosters among these organizations and the visibility it affords not only for Head Start, but also for RAP. Sharing responsibility for the myriad details involved in a training event developed rapport as it required increased communication and joint decisions. Co-sponsorship of training brought organizations closer together and strengthened networks. Increased awareness and recognition of Head Start's mainstreaming policy and practices were also welcomed byproducts of joint training events.

Saving money was a strong incentive for joint training events. Costs and tasks were shared, and other resources pooled, and the results were greater than any one group could have accomplished on its own. Head Start programs saved travel and per diem costs when several Head Start T/TA providers coordinated their training events.

Agendas at co-sponsored trainings were typically expanded to accommodate a greater variety of material. Since co-sponsored training also tends to increase the size and diversity of the audiences, RAPs gained access to personnel, including other Head Start component coordinators and administrators, who might not ordinarily have attended mainstreaming training. In this way, collaboration strengthened intercomponent coordination even within Head Start.

Joint sponsorship of training events rises or falls on the strength of relationships and requires solid organizational and interpersonal skills. Success often requires more time and energy since agreements must be reached on joint goals. Pooling resources of several organizations also requires sharing control over such diverse aspects of the event as the dates, the focus of the workshops, the design of the brochure, and responsibility for expenses. One unfortunate byproduct of co-sponsorship was some loss of visibility and recognition for the RAPs themselves.

Among the most common co-sponsors of training with RAPs this year were Head Start-related groups, namely Head Start associations, directors' groups, Resource Centers, and individual grantees themselves. SEAs, state departments, and various statewide interagency councils were also ready partners. Less frequent co-sponsors included state-level AEYC and DEC organizations, universities, and other Federal projects.

Participant Assessments of RAP Training

Detailed information obtained from the participants at RAP training events offers yet another look at the workshops. The assessment data reported here are derived completely from trainees' reports and offer a supplementary view of the training reported by the RAPs in the earlier part of this chapter.

A sample of trainees was surveyed for their reactions to RAP taining. As in past years, the method for obtaining these data was a short, standardized form. Data were gathered on the background of the respondents, topics of training, satisfaction, problems, and suggestions, among other items.

The decision on the representativeness of the events selected to be evaluated was left to the RAPs. In the fall, the RAPs pre-selected at least two of their scheduled training events. At those events, the RAPs distributed evaluation forms to all attendees at the conclusion of the training and mailed the sealed forms to RLA. One-hundred forms were chosen from each RAP. When more than 100 forms were received, RLA randomly selected the 100 forms to be used as the final sample.

Table 4.6, Number of Training Conferences and Training Participants, provides data about the 1986-87 sample. It shows that of the 421 events held, 34 were evaluated, representing 8 percent of all events. In all, 1,100 of the 26,613

TABLE 4.6:NUMBER OF TRAINING CONFERENCES AND TRAINING PARTICIPANTS

RAP:	Conferences:		Participants	
	Total Number:	Number Evaluated:	Total Number:	Evaluation Responses:
New England	22	2	1,828	100
NYU	27	2	2,380	100
U Maryland	23	4	779	100
Chapel Hill	46	3	3,979	100
Mississippi	24	2	2,061	100
Great Lakes	55	2	4,240	100
Texas Tech	54	2	4,164	100
Region VII	23	3	1,880	100
Denver	51	6	1,165	100
SWHD	68	4	3,373	100
PSU	28	4	764	100
Total all RAPs	421	34	26,613	1,100
Average all RAPs	38	3	2,419	100

persons trained, or 4 percent of all trainees, were surveyed. (This year's sample characteristics compare rather closely with the previous year's sample which represented 11 percent of the events and 5 percent of the participants.)

Conclusions can be drawn from the patterns of data at the network level with greater certainty than at the level of the individual RAP. In general, sample sizes are small. Moreover, much variability exists among target groups, topics, size of events, length of events, and so forth.

Background of Trainees

As shown in Table 4.7, Background of RAP Training Participants, 98 percent of the trainees were Head Start and 2 percent were non-Head Start personnel. Teachers made up 29 percent of respondents, while all teaching staff (teachers, aides, and home visitors) formed 55 percent of respondents. A comparison with last year's results shows little change overall in the composition of staff in attendance. The number of teaching staff, however, did fall by eight percent, and the number of handicap coordinators and social service staff rose this year by four percent and two percent, respectively. The absence of major fluctuations overall was not surprising since no new initiatives were added to the RAPs' contracts for this year.

The Mississippi RAP placed an emphasis on training teachers (61% vs. the average of 29%), while the University of Maryland RAP targeted handicap coordinators (50% vs. the average of 16%). The largest concentration of home visitors was found at the New England RAP (26% vs. the average of 8%). The NYU, SWHD, and Texas Tech RAPs trained more social service staff than average (13%, 12%, and 11% vs. 7%). Parents of Head Start children were more frequent recipients of training at the Region VII and Texas Tech RAPs (16% and 13%, vs. the average of 3%). The Chapel Hill and Denver RAPs targeted "other" Head Start staff (directors, component coordinators, cooks, etc.) more than other RAPs (27% and 25% vs. the average of 17%). While non-Head Start staff made up only 2 percent of trainees overall, they were a more significant target group for the PSU (7%) and Region VII RAPs (5%).

As shown in Table 4.8, Additional Background of Trainees, 79 percent of the respondents worked either directly (48%) or indirectly (31%) with handicapped children. Seventeen percent had no contact with handicapped children. Since the previous year, the number of trainees having some contact with handicapped children increased by 1 percentage point overall, although the numbers were higher at some RAPs. For example, 90 percent of trainees at the University of Maryland, 89 percent at Great Lakes, and 84 percent at Chapel Hill RAPs' trainings work with handicapped children. The most substantial changes since 1985-86 were the increases of trainees working with handicapped children at NYU (rising from 62% to 76%) and New England (from 69% to 81%). Mississippi RAP had the smallest proportion of trainees working with handicapped children (56%).

The second part of Table 4.8 shows that the number of trainees previously attending RAP training events rose this year, from 58 percent to 62 percent of all trainees. The Region VII, NYU, SWHD, PSU, and Denver RAPs had higher than average proportions of "new" trainees. These data bear out the goal of Region VII RAP to attract people who had not attended in recent years.

TABLE 4.7: BACKGROUND OF RAP TRAINING PARTICIPANTS: TYPES OF TRAINEES
(Note: proportions shown--e.g., .73--times 100 equal percents, i.e., 73%. All figures added.)

RAP:	Head Start Staff:								Total, Head Start Staff	Non-Head Start Staff	No Answer to item	Total, All Trainees
	Teaching Staff:				Other Staff:							
	H.S. Teachers	Teaching Aides	Home Visitor	Total, Teaching	HC Coord	Social Service	H.S. Parent	Other HS*				
New England	0.21	0.15	0.26	0.62	0.05	0.09	0.01	0.20	0.97	0.01	0.02	1.00
NYU	0.24	0.18	0.00	0.42	0.25	0.13	0.00	0.17	0.97	0.03	0.00	1.00
U Maryland	0.13	0.03	0.12	0.28	0.50	0.02	0.00	0.19	0.99	0.01	0.00	1.00
Chapel Hill	0.28	0.12	0.02	0.42	0.25	0.05	0.00	0.27	0.99	0.01	0.00	1.00
Mississippi	0.61	0.29	0.00	0.90	0.04	0.00	0.00	0.04	0.98	0.00	0.02	1.00
Great Lakes	0.32	0.19	0.04	0.55	0.15	0.09	0.01	0.17	0.97	0.03	0.00	1.00
Texas Tech	0.24	0.21	0.02	0.47	0.10	0.11	0.13	0.19	1.00	0.00	0.00	1.00
Region VII	0.20	0.18	0.15	0.53	0.10	0.06	0.16	0.10	0.95	0.05	0.00	1.00
Denver	0.22	0.24	0.15	0.61	0.09	0.05	0.00	0.25	1.00	0.00	0.00	1.00
SWHD	0.37	0.19	0.00	0.56	0.15	0.12	0.01	0.15	0.99	0.01	0.00	1.00
PSU	0.37	0.21	0.10	0.68	0.04	0.07	0.02	0.12	0.93	0.07	0.00	1.00
ALL RAPS:	0.29	0.18	0.08	0.55	0.16	0.07	0.03	0.17	0.98	0.02	0.00	1.00

*Includes Head Start Directors, Other HS Component Coordinators, consultants (if they identified themselves as Head Start staff), other assistants and aides, nurses, cooks, drivers, and others identifying themselves as Head Start staff but not stating their positions. Proportions are based on total number of cases.

TABLE 4.8: ADDITIONAL BACKGROUND OF TRAINEES: WORK W/HC CHILDREN; PREVIOUS RAP TRAINING
(Note: proportions shown--e.g., .73--times 100 equal percents, i.e., 73%. All figures are rounded)*

RAP:	Work With Handicapped Children?					Attend RAP Training Before?			
	Yes, Direct	Yes, Indirect	No Contact	No Answer	Total, All:	Yes, Before	No--New Trainee	No Answer	Total, All:
New England	0.50	0.31	0.13	0.06	1.00	0.70	0.25	0.05	1.00
NYU	0.29	0.47	0.20	0.04	1.00	0.55	0.45	0.00	1.00
U Maryland	0.35	0.55	0.09	0.01	1.00	0.68	0.30	0.02	1.00
Chapel Hill	0.42	0.42	0.12	0.04	1.00	0.72	0.25	0.03	1.00
Mississippi	0.49	0.08	0.31	0.12	1.00	0.72	0.23	0.05	1.00
Great Lakes	0.59	0.30	0.09	0.02	1.00	0.73	0.22	0.05	1.00
Texas Tech	0.42	0.30	0.24	0.04	1.00	0.62	0.35	0.03	1.00
Region VII	0.55	0.20	0.22	0.03	1.00	0.53	0.46	0.01	1.00
Denver	0.56	0.25	0.17	0.02	1.00	0.60	0.40	0.00	1.00
SWHD	0.52	0.27	0.14	0.07	1.00	0.47	0.45	0.08	1.00
PSU	0.56	0.25	0.19	0.00	1.00	0.55	0.44	0.01	1.00
ALL RAPS:	0.48	0.31	0.17	0.04	1.00	0.62	0.35	0.03	1.00

* Proportions are based on total number of cases, given in Table 4.5.

Satisfaction

Trainees were asked to rate the quality of RAPs' training as "excellent," "good," "fair," or "poor." The appraisals, in turn, were coded on a four-point scale where "excellent" equalled four, "good" equalled three, "fair" equalled two, and "poor" equalled one. The overall average score for the network was 3.60, once again topping the score of every previous year. As Table 4.9, Satisfaction with Training, shows, individual RAP scores ranged from 3.34 to 3.82. Although scores for all RAPs are sound acclamations of their training efforts, as has been true throughout the years, seven of the 11 RAPs bettered their "scores" from the previous year.

In all, 96 percent of respondents rated RAP training as either "excellent" or "good." No training was rated "poor." Only three percent rated any training as "fair." Lower ratings were related to a variety of reasons including the facilities, presenters, and content. These are discussed in a later section on problems.

The Denver RAP received "excellent" ratings from 82 percent of its training participants. The University of Maryland RAP training was also extremely well-received, with 77 percent rating it "excellent" and a total of 99 percent rating it either "excellent" or "good." One hundred percent of the Mississippi RAP's trainers rated their training as "excellent" or "good." Along with Chapel Hill, these four RAPs earned the highest "grades" overall.

Responses to the open-ended question, "What did you like best about the training?", provided insight on the satisfaction rates. Roughly 10 percent of the participants reported liking "everything!" However, training content was most commonly cited, specified by about 24 percent. Many participants commented on the presenters, their interest, delivery, dedication, and responsiveness to trainees' needs as the best feature of the RAP training. The use of materials and handouts, but especially activities which involved the participants, were very popular as were the use of videos and films, group discussions, and question-and-answer periods. Others cited the competence, dedication, and friendliness of RAP staff, the excellent planning and organization of the events, the variety of topics, the timing, format, and the access to different levels of training.

Workshop Topics

The RLA assessment form includes a list of 19 workshop topics representative of the RAP training content. Trainees are requested to identify all of the topics covered in the training they have received. See Table 4.10, Workshop Topics Cited by Training Conference Participants, for the results from this year.

A remarkable stability, not only in the content of RAP training but also in the emphasis given topics, has persisted from year to year. Once again, "mainstreaming" was the most commonly cited workshop topic; it was mentioned by 52 percent of all participants. Just as frequent this year was training on "working with families (52%)." "Behavior management" (48%), "planning for each child" (46%), and "attitudes towards handicapped children" (41%) followed in frequency. Compared with the previous year, more attention was given to "behavior management" and "intercomponent coordination" and less to "child abuse and neglect"

TABLE 4.9: SATISFACTION WITH MAINSTREAMING TRAINING

(Note: average "grade" weighted as shown, with "no answers" excluded)

RAP:	Proportion Rating Satisfaction as:					Total,	Average
	Excellent(=4)	Good (=3)	Fair (=2)	Poor (=1)	No Answer	All:	"Grade"*
New England	0.50	0.45	0.01	0.00	0.04	1.00	3.51
NYU	0.42	0.47	0.09	0.00	0.02	1.00	3.34
U Maryland	0.77	0.22	0.00	0.00	0.01	1.00	3.78
Chapel Hill	0.74	0.24	0.02	0.00	0.00	1.00	3.72
Mississippi	0.71	0.29	0.00	0.00	0.00	1.00	3.71
Great Lakes	0.59	0.33	0.08	0.00	0.00	1.00	3.51
Texas Tech	0.54	0.42	0.04	0.00	0.00	1.00	3.50
Region VII	0.57	0.39	0.03	0.00	0.01	1.00	3.55
Denver	0.82	0.16	0.01	0.00	0.01	1.00	3.82
SWHD	0.67	0.31	0.01	0.00	0.01	1.00	3.67
PSU	0.55	0.39	0.04	0.00	0.02	1.00	3.52
ALL RAPS:	0.63	0.33	0.03	0.00	0.01	1.00	3.60

*Average "grade" computed on the usual 4.0 system, as weighted above, with "no answer" cases excluded. "No answers" are included, however, in the proportions showing the distribution of trainees giving each response.

TABLE 4.10: WORKSHOP TOPICS CITED BY TRAINING CONFERENCE PARTICIPANTS

(Note: Proportions cited--e.g., .73--times 100 equal percents, e.g., 73%. Totals add to well over 1.0 (100%) due to multiple responses.)

RAP:	Percent Citing Attendance in Workshops on:																				Average Number of Topics Cited:
	Screening/Assessmt/ Diagnos	Childrn Mainstreaming	Planning for Each Child	Developing IEP's, etc.	Mgmt. of the HC effort	Curriculum Techniques	Work With Public Schools	Inter-Component Coord	Work with Families	Attitudes toward HC	Behavior Management	Work With Gifted Child	Child Abuse/ Neglect	Work W/ Severely HC	Serve Migrant HS Child	Serve Indian HS Child	Serve Home-Based HC	Specific HC Conditions*	Other Topics	No Answer	
N Eng	0.20	0.52	0.43	0.10	0.29	0.37	0.17	0.15	0.60	0.63	0.48	0.23	0.17	0.22	0.09	0.03	0.28	0.21	0.12	0.02	5.40
NYU	0.41	0.76	0.45	0.20	0.56	0.36	0.38	0.24	0.50	0.46	0.34	0.20	0.22	0.38	0.05	0.03	0.29	0.18	0.23	0.01	6.30
U MD	0.32	0.41	0.37	0.23	0.26	0.42	0.16	0.21	0.45	0.36	0.24	0.06	0.10	0.14	0.01	0.00	0.14	0.08	0.16	0.02	4.20
C Hill	0.35	0.85	0.49	0.33	0.29	0.46	0.32	0.23	0.49	0.46	0.50	0.16	0.07	0.28	0.02	0.01	0.20	0.16	0.07	0.00	5.74
Miss	0.27	0.48	0.45	0.22	0.38	0.23	0.06	0.08	0.52	0.27	0.60	0.13	0.12	0.23	0.04	0.00	0.14	0.71	0.41	0.02	5.45
G Lakes	0.41	0.56	0.36	0.18	0.35	0.35	0.29	0.18	0.70	0.52	0.42	0.21	0.05	0.32	0.05	0.02	0.15	0.43	0.17	0.02	5.84
T Tech	0.58	0.63	0.43	0.43	0.32	0.40	0.26	0.20	0.52	0.36	0.55	0.24	0.39	0.21	0.11	0.04	0.18	0.12	0.06	0.00	6.03
R VII	0.37	0.26	0.39	0.12	0.26	0.49	0.35	0.24	0.60	0.41	0.53	0.26	0.17	0.20	0.03	0.01	0.20	0.22	0.05	0.00	5.16
Denver	0.60	0.54	0.56	0.37	0.46	0.42	0.25	0.25	0.64	0.54	0.69	0.46	0.19	0.32	0.01	0.00	0.24	0.23	0.01	0.00	6.78
SWHD	0.31	0.41	0.41	0.35	0.38	0.10	0.11	0.24	0.30	0.19	0.24	0.04	0.14	0.09	0.47	0.10	0.06	0.07	0.35	0.06	4.64
PSU	0.42	0.27	0.70	0.26	0.24	0.49	0.18	0.56	0.43	0.27	0.73	0.22	0.17	0.10	0.02	0.05	0.19	0.10	0.04	0.01	5.49
All:	0.39	0.52	0.46	0.25	0.34	0.37	0.23	0.23	0.52	0.41	0.48	0.20	0.16	0.23	0.08	0.03	0.19	0.23	0.15	0.01	5.56

*See the following table for details of specific handicapping conditions cited by the respondents. Proportions are based on a total of 1,100 cases, except for the last column which indicates the average number of topics cited by those respondents citing any topics.

and the "development of IEPs." The major change was the rise (5 percentage points) in frequency of "behavior management" as a workshop topic over the previous year.

The next most common workshop topics were screening/assessment/diagnosis, curriculum techniques, and management of the handicap effort, followed by development of IEPs, working with public schools, intercomponent coordination, working with severely handicapped children, and specific handicapping conditions. "Other" topics were common at the training by the Mississippi RAP (working with three-year-olds and self-esteem) and SWHD RAP (observation).

Of the 19 pre-determined categories, cited least often overall were "serving Indian Head Start handicapped children" (3%) and "serving migrant Head Start handicapped children" (8%). These findings reflect the fact that migrant and Indian Head Start programs form a small portion of all Head Start grantees and that some RAPs have neither Indian nor migrant grantees to serve. Moreover, this year's figures exclude the training that was done by the Indian RAP. Compared with the network overall, however, the SWHD RAP was most likely to address services both to Indian grantees (10% cited such workshops) and to migrant grantees (47%). The Texas Tech and New England RAPs also addressed services to migrant Head Start issues more often than most RAPs.

Approximately one-fifth of all respondents attended a workshop on a specific handicapping condition. Table 4.11, Workshop Topics Cited on Specific Handicaps, shows that three handicapping conditions were most common: learning disability, emotional disturbance, and orthopedic/physical impairment. The SWHD, PSU, Texas Tech, Great Lakes, and Denver RAPs addressed specific handicapping conditions most frequently.

Changes Resulting from the Training

Participants were asked about the anticipated effects of their training. Table 4.12, What Trainees Expect To Do Differently After Their Training, exhibits these results. The average number of changes anticipated by respondents rose from 3.0 the previous year to 3.25. The rank order of the responses, however, was unchanged from the previous two years. The most commonly expected change (from among nine choices offered) was to "observe more closely," cited by 58 percent of the trainees. The next most common responses were "use new resources and materials" (50%); "use new ways to work with handicapped children" (43%); "work more closely with other staff" (39%); "work more closely with families" (35%); "use outside resources" (30%); and "develop IEPs" (16%). Three percent of the trainees mentioned other changes. Eight percent of the respondents said that they did not expect to make any changes in their work practices.

Trainees at Texas Tech RAP training expected to implement 3.76 changes, the highest number reported for an individual RAP. The Great Lakes, Denver, NYU, Chapel Hill, and Mississippi RAP respondents also reported more than the average expected changes.

A separate, small-scale follow-up survey was conducted by RLA for several years to verify whether traines actually experienced the changes they had anticipated. This validation study consistently confirmed that over time trainees do put into practice the techniques learned at RAP training. Some expected differences in practices did not come to pass, but these were balanced by other changes which, though unanticipated, did occur. This follow-up study has not been conducted

TABLE 4.11: TOPICS CITED, CONTINUED: WORKSHOPS CITED ON SPECIFIC HANDICAPS

RAP:	Blind/ Visually Impaired	Deaf/ Hearing Impaired	Speech Impaired	Emotion-ally Disturbed	Physic-ally Impaired	Health Impaired	Learning Disabled	Mentally Retarded	Handicap not Spe-cified	Average No. HCs Cited
New England	0.00	0.05	0.48	0.05	0.00	0.10	0.00	0.00	0.43	1.10
NYU	0.06	0.00	0.00	0.00	0.22	0.56	0.00	0.00	0.33	1.17
U Maryland	0.00	0.00	0.13	0.00	0.13	0.00	0.63	0.13	0.38	1.38
Chapel Hill	0.31	0.06	0.06	0.06	0.19	0.13	0.00	0.13	0.31	1.25
Mississippi	0.23	0.00	0.00	0.52	0.20	0.00	0.24	0.00	0.03	1.21
Great Lakes	0.02	0.02	0.14	0.05	0.26	0.44	0.28	0.02	0.23	1.47
Texas Tech	0.08	0.08	0.17	0.08	0.42	0.00	0.08	0.08	0.50	1.50
Region VII	0.00	0.23	0.05	0.05	0.00	0.09	0.32	0.00	0.45	1.18
Denver	0.26	0.04	0.26	0.13	0.17	0.09	0.22	0.04	0.22	1.43
SWHD	0.14	0.29	0.57	0.14	0.14	0.29	0.14	0.14	0.14	2.00
PSU	0.30	0.30	0.40	0.10	0.10	0.00	0.40	0.00	0.00	1.60
ALL RAPS	0.14	0.06	0.14	0.19	0.18	0.16	0.21	0.03	0.23	0.00

Warning: in this table, proportions are based on the total number of trainees citing any handicaps as training topics and measure the relative propensity for particular disabilities to be those cited. For a measure of the general propensity to report any handicapping condition as a workshop topic, see Table 4.9, column 18.
These conventions are consistent with those employed in the RAP evaluation in past years.

TABLE 4.12: WHAT TRAINEES EXPECT TO DO DIFFERENTLY AFTER THEIR TRAINING
(Note: proportions--e.g., .73--times 100 equal percents, i.e., 73%. Totals exceed 1.0 due to multiple responses)

RAP:	Use New Ways w/ Childrn	Observe More Closely	Develop IEP,IPP (etc)	Work Closely w:		Use New Materl	Use Out-Side Resource	Work w/ Severely HC Chld	Other Changes	No Ex-pected Changes	No Answer	Average No. of Changes:
				Family	O/Staff							
New England	0.41	0.60	0.04	0.23	0.28	0.54	0.18	0.17	0.03	0.09	0.02	2.79
NYU	0.35	0.43	0.14	0.33	0.46	0.52	0.51	0.26	0.00	0.10	0.03	3.45
U Maryland	0.49	0.37	0.10	0.21	0.42	0.52	0.29	0.15	0.08	0.06	0.02	2.86
Chapel Hill	0.47	0.56	0.11	0.38	0.47	0.48	0.34	0.19	0.00	0.09	0.04	3.45
Mississippi	0.57	0.64	0.17	0.51	0.39	0.47	0.23	0.18	0.01	0.06	0.00	3.37
Great Lakes	0.44	0.66	0.14	0.36	0.47	0.58	0.33	0.25	0.06	0.08	0.02	3.66
Texas Tech	0.47	0.62	0.29	0.48	0.45	0.52	0.35	0.17	0.00	0.10	0.01	3.76
Region VII	0.41	0.66	0.08	0.35	0.36	0.44	0.29	0.11	0.04	0.07	0.04	3.08
Denver	0.40	0.72	0.18	0.46	0.43	0.61	0.22	0.25	0.03	0.04	0.02	3.51
SWHD	0.36	0.46	0.34	0.35	0.21	0.27	0.36	0.16	0.04	0.09	0.03	2.90
PSU	0.36	0.63	0.18	0.24	0.36	0.51	0.17	0.05	0.00	0.09	0.06	2.94
ALL RAPS:	0.43	0.58	0.16	0.35	0.39	0.50	0.30	0.18	0.03	0.08	0.03	3.25

Proportions are based on the total of 1,100 case, except for the last column which indicates the average number of changes cited by those respondents citing any changes.

for the past three years because the evaluation study has been scaled back in size and because the results of the validation studies had been so consistent over the years.

Problems Experienced at Training

The training assessment form includes two questions intended to surface problems related to the mainstreaming training. One question deals with difficulties arising from logistics, equipment, facilities, and so forth, while the other treats problems with the planning, content, and presentation of training itself. Results are provided in Tables 4.13, Unexpected Conditions that Affected the Training Conferences, and 4.14, Other Problems that Affected the Training Conferences.

Seventy-five percent of trainees reported "no problem" of any kind regarding equipment, facility, room temperature, etc. Fewest problems were experienced at training by the SWHD RAP (3%) and Mississippi RAP (9%). Only 22 percent of trainees experienced any problems of this kind. Of those who did, uncomfortable room temperature was the greatest complaint by far (15% of 22%). Four percent cited problems with the training facility, and two percent encountered equipment problems.

Even fewer trainees reported problems more directly related to the content of the training. (See Table 4.14.) Eighty-seven percent reported "no problems" at all. Only 9 percent had some problem with the nature of the training, and they reported an average of 1.16 problems each. A small percentage found either that "training was not what I expected" (2%), or was "too general" (2%). One percent judged the content as "too simple." No problems at all were reported by Mississippi RAP trainees. Smaller than average numbers of problems were reported at seven of the eleven RAPs. At 23 percent, Great Lakes RAP trainees produced the highest level of complaints, although no clear pattern of problems was evident from these responses.

Suggestions for Next Year

Invited to make suggestions for training topics for the 1987-88 program year, 88 percent of the trainees did so, and results are shown in Table 4.15, Suggestions from Conference Participants for Next Year's RAP Training. Overall, results resembled those obtained in past years. Future sessions were desired on behavior management, working with families of the handicapped, working with public schools, supervisor's training, and child abuse and neglect. Trainees also expressed interest in IEPs, severely handicapped children, and specific handicapping conditions. Suggestions for workshops on specific handicapping conditions were made by 8 percent of the trainees. Trainees at the Texas Tech and Great Lakes RAPs training made the most suggestions.

Summary

The RAPs received very positive evaluations for their 1986-87 trainings. RAP training was as successful an experience for participants this year as it had been in the past. Based on the results of participant assessments, few changes in RAP training were desired. In fact, since the overall satisfaction level was higher for 1986-87 than it had been in the nine year history of RAP training, it suggests that a "good thing" has only gotten better. In addition to satisfaction ratings, the number of ways in which trainees expected to operate differ-

TABLE 4.13: UNEXPECTED CONDITIONS THAT AFFECTED THE TRAINING CONFERENCES
(Note: proportions--e.g., .73--times 100 = percents, e.g. 73%. Totals include multiple responses.)

RAP:	No Unexpected Conditions:	Yes: unexpected conditions include:				Average Number of Conditions Cited:	Proportion Citing Any Condition	Average No Response to Item Cited:
		Equipment Not Working	Poor Facility	Room Temperature	Other Circumstances			
New England	0.75	0.06	0.04	0.13	0.01	1.04	0.23	0.02
NYU	0.83	0.00	0.03	0.10	0.00	1.08	0.12	0.05
U Maryland	0.76	0.00	0.00	0.22	0.01	1.05	0.22	0.02
Chapel Hill	0.84	0.01	0.03	0.08	0.01	1.08	0.12	0.04
Mississippi	0.89	0.01	0.00	0.06	0.00	1.00	0.07	0.04
Great Lakes	0.52	0.03	0.07	0.32	0.09	1.11	0.46	0.02
Texas Tech	0.81	0.00	0.03	0.07	0.08	1.06	0.17	0.02
Region VII	0.62	0.08	0.05	0.27	0.10	1.35	0.37	0.01
Denver	0.61	0.02	0.12	0.21	0.01	1.13	0.32	0.07
SWHD	0.96	0.00	0.03	0.01	0.00	1.33	0.03	0.01
PSU	0.71	0.01	0.03	0.24	0.04	1.10	0.29	0.00
ALL RAPS	0.75	0.02	0.04	0.16	0.03	1.13	0.22	0.03

Proportions are based on the total of 1,100 cases, except for column 6 which indicates the average number of conditions cited by respondents citing any conditions.

TABLE 4.14: OTHER PROBLEMS THAT AFFECTED THE TRAINING CONFERENCES

(Note: proportions--e.g., .73--times 100 equal percents, i.e., 73%. Totals exceed 1.0 (100%) due to multiple answers)

RAP:	No Problems	Poorly Planned	Too General	Content Too Simple	Content Too Difficult	Not What Trainee Expected	Other Problem	Average Number Problems Cited:	Proportion Citing A Problem	No Response to Item
New England	0.82	0.00	0.05	0.04	0.01	0.03	0.04	1.13	0.15	0.03
NYU	0.82	0.00	0.04	0.00	0.01	0.03	0.10	1.13	0.16	0.02
U Maryland	0.89	0.00	0.01	0.01	0.00	0.00	0.04	1.20	0.05	0.06
Chapel Hill	0.92	0.00	0.00	0.00	0.00	0.00	0.03	1.00	0.03	0.05
Mississippi	0.99	0.00	0.00	0.00	0.00	0.00	0.00	.00	0.00	0.01
Great Lakes	0.67	0.02	0.04	0.03	0.00	0.07	0.11	1.17	0.23	0.10
Texas Tech	0.84	0.03	0.04	0.01	0.00	0.01	0.04	1.08	0.12	0.04
Region VII	0.90	0.00	0.00	0.00	0.00	0.05	0.03	1.14	0.07	0.03
Denver	0.91	0.00	0.02	0.01	0.01	0.00	0.02	1.50	0.04	0.05
SWHD	0.93	0.00	0.00	0.01	0.01	0.01	0.02	1.00	0.05	0.02
PSU	0.92	0.00	0.01	0.01	0.00	0.03	0.01	1.50	0.04	0.04
ALL RAPS	0.87	0.00	0.02	0.01	0.00	0.02	0.04	1.16	0.09	0.04

Proportions are based on the total of 1,100 cases, except for column 8 which indicates the average number of problems cited by those respondents citing any problems.

TABLE 4.15: SUGGESTIONS FROM CONFERENCE PARTICIPANTS FOR NEXT YEAR'S RAP TRAINING

(Note: proportions--e.g., .73--times 100 equal percents, i.e., 73%. Totals exceed 1.0 [100%], due to multiple responses)

RAP:	Proportions suggesting training in such Mainstreaming Topics as: IEP's, IPP's, etc.	Behavior Man- agement	Working w/Public Schools	Child Abuse/ Neglect	Working w/severe HCs	Working w/families	Supervisor's Training	Specific HC Condit.	Other Suggestions	No Answer	Average Number of Suggestions
New England	0.20	0.43	0.25	0.37	0.09	0.30	0.28	0.07	0.07	0.12	2.34
NYU	0.28	0.34	0.40	0.29	0.07	0.31	0.32	0.09	0.04	0.14	2.49
U Maryland	0.19	0.32	0.30	0.13	0.14	0.29	0.30	0.08	0.07	0.14	2.12
Chapel Hill	0.18	0.35	0.35	0.27	0.18	0.27	0.40	0.12	0.01	0.09	2.34
Mississippi	0.21	0.43	0.13	0.36	0.22	0.29	0.24	0.06	0.02	0.08	2.13
Great Lakes	0.29	0.48	0.41	0.28	0.17	0.32	0.31	0.10	0.09	0.07	2.63
Texas Tech	0.30	0.45	0.28	0.38	0.24	0.36	0.44	0.10	0.06	0.07	2.81
Region VII	0.24	0.53	0.28	0.36	0.11	0.35	0.23	0.10	0.03	0.10	2.48
Denver	0.25	0.37	0.28	0.27	0.07	0.27	0.20	0.04	0.10	0.14	2.15
SWHD	0.24	0.41	0.20	0.11	0.24	0.33	0.25	0.07	0.05	0.25	2.53
PSU	0.18	0.27	0.36	0.32	0.11	0.28	0.24	0.07	0.02	0.13	2.13
ALL RAPS:	0.23	0.40	0.29	0.29	0.15	0.31	0.29	0.08	0.05	0.12	2.38

Proportions are based on a total of 1,100 cases, except for the last column which indicates the average number of suggestions cited by those citing any suggestions.

ently rose this year -- an outcome directly attributable to the effectiveness of RAP training. Maintaining a high calibre of training was an accomplishment, surpassing high levels of performance and quality of the past.

3. Facilitate Collaboration

The task of promoting cooperation between Head Start and other agencies serving children with handicaps took on greater significance in the 1986-87 year. Among RAP tasks, it ranked as one of four top priorities. Historically, RAPs' role in the collaborative process stems from a cooperative interagency agreement signed by ACYF and the Office of Education in 1978. Public Law 94-142, the Education of the Handicapped Act, which had passed in 1975, mandated cooperation among public agencies and set the tone for this agreement. This year, passage of new federal legislation, PL 99-457, involved Head Start with public agencies in ways yet to be charted.

Public Law 99-457 amended Public Law 92-142, the Education of All Handicapped Act. It authorized two new programs: the preschool grant program which requires SEAs to serve all three- to five-year-old children with handicaps by the 1990-1991 school year and the handicapped infants and toddlers program which offers new funding for services to children who are at risk of substantial developmental delay because of medical or environmental influences. Both of these new initiatives involve RAPs, as they form the bridge between Head Start, the largest provider of services to preschool age children with handicaps, and the State Education Agencies.

By contract each RAP is required to:

- Take the role of facilitator in promoting formal written agreements on PL 94-142 between each State Education Agency in the service area and Head Start grantees.
- Where a state agreement exists or where circumstances warrant, the contractor should move to facilitate and assist in the implementation of agreements between local education agencies and Head Start programs.

RAPs tackle the task of collaboration in as many different ways as there are RAPs, based on the skills and experience of the RAP staff and the disposition of state and local agencies toward specifying exchanges of services in writing. In addition to promoting shared services with public school systems, RAPs work with other agencies and organizations to provide improved services to young children with handicaps.

This chapter will present the undertakings of the RAP network to meet the objectives of the task through collaboration with State Education Agencies (SEAs). RAPs' efforts are viewed from two perspectives: first, from that of the SEAs and, secondly, from that of the RAPs themselves. In addition, RAPs' descriptions of their efforts to facilitate collaboration with Local Education Agencies (LEAs), and with other agencies serving young handicapped children are discussed. The section ends with a listing of changes in practices affecting services to these children within states.

Collaboration with State Education Agencies: The SEA Survey

Because the directive to work with SEA has been emphasized by ACYF, the evaluation included a telephone survey of SEA personnel and their counterparts in U.S. Territories. The survey examined in detail the professional exchanges between RAPs and SEAs, inquiring into the nature of contacts, frequency of communications, satisfaction of SEAs with RAP services, problems, suggestions for improvement, and services which SEAs identify as most valuable. SEA staff were also asked to cite changes in practices affecting services to young children with handicaps in their states. Table 4.16, Interaction Between State Education Agencies and Resource Access Projects, 1986-1987, presents the findings from this year's survey.

All states, the District of Columbia, Puerto Rico, and the Virgin Islands were included in the survey. (The Pacific territories were eliminated from the survey this year, because the SWHD RAP is not required to provide services to the Head Start programs there as the Pacific RAP had in the past.) Interviews were conducted with all of the SEAs with the exception of the District of Columbia where the RAP's contact person was on extended leave. In total, 52 interviews were conducted.

Since the previous survey, staff changed in 19 states. This changeover represents 36 percent of the respondents. Only five respondents, or 10 percent, have remained in their positions since the original SEA telephone survey of 1977. They are located in Connecticut, Delaware, Tennessee, Oklahoma, and Iowa.

Overall Findings

An analysis of the findings from interviews with SEA representatives shows positive trends over the years. Table 4.17, National Profile of RAP/SEA Interactions, 1981-1987, depicts these trends. This year exchanges between the RAP and SEA occurred almost on a monthly basis. SEAs described a variety of contacts with RAPs averaging about four types. SEAs exhibited a high degree of satisfaction with RAP services, 3.5 on a four-point scale.

While the pattern reflects successful interaction over the years, this year there were indications that progress has slowed. The frequency of interaction and satisfaction were almost even with the past year overall. However, for seven of eleven RAPs, contact was less frequent and for six RAPs satisfaction scores were lower than last year. Types of exchanges dropped from 5.5 to 4.2. (In part, the change was due to the elimination of two categories of responses. However, within categories that remained unchanged, there were 16 percent fewer citations.) More SEAs offered suggestions to improve the RAP's work than in the previous survey, 34 compared to 16. More problems were cited -- seven this year, versus four last year. Table 4.17 shows that the performance of the network consistently improved until this year. The restructuring of the network alone does not account for the lower scores. Although the four RAPs that received larger territories to serve showed some downward indications, others did as well. These shifts reflected how RAPs accommodated to reduced budgets, changed staffs in-house or at SEAs, new legislation, or altered circumstances in various states. These changes will be discussed below.

Frequency of Contact

Sixty-five percent of the SEAs reported some contact with RAPs monthly or more often.

Table 4.16
Interaction Between State Education Agencies and Resource Access Projects
1986-1987

CHARACTERISTICS	NE	NYU	U.Md	CH	MS	GL	TT	RVII	DENVER	SWHD	PSU	NATIONAL	
Number of SEAs	6	4	5	7	1	6	5	4	6	4	4	52	
Frequency of Contact more than monthly; 4 monthly; 3 occasionally (6-11 x/yr); 2 infrequently (1-5 x/yr); 1 never; 0	2.8	2.8	3.0	2.9	4.0	3.7	2.0	2.8	2.3	3.0	3.3	2.9	
Nature of Contacts (No. SEAs responding)												# Contacts	% SEA
Advisory Committee	2	2	3	2	1	5	1	3	4	3	1	25	48
Meetings, Workshops, Conferences	4	4	1	6	1	4	3	2	2	2	0	29	56
Materials	3	3	2	7	0	2	0	3	2	0	1	23	44
SEA/HS collaboration	3	0	1	1	0	0	1	1	1	2	2	12	23
LEA/HS collaboration	0	0	1	1	0	0	0	0	0	0	0	2	4
SEA used as provider	3	0	0	1	0	0	0	1	1	2	2	10	19
RAP used as provider	2	2	1	1	0	1	1	3	2	3	1	17	33
Information exchange	6	4	5	6	1	6	4	4	6	4	4	50	96
Mutual project	0	0	1	1	0	5	3	1	3	5	1	20	38
Other	1	0	1	3	1	3	1	7	2	3	2	24	46
Introductory contact	1	0	0	0	0	0	0	0	0	1	0	2	4
None	0	0	0	0	0	0	0	0	0	0	0	0	0
Average No. Types of Contact per state or territory	4.2	3.8	3.2	4.1	4.0	4.3	2.8	6.3	3.8	6.3	3.5	4.2	
Satisfaction Grade Excellent (4.0); Good (3.0-3.9); Fair (2.0-2.9); Poor (1.0-1.9)	3.6	3.9	3.5	3.8	3.0	3.8	2.4	4.0	3.4	3.8	3.6	3.5	
Suggestions	3	1	3	4	1	6	4	2	4	3	3	34	

Table 4.17

National Profile of RAP/SEA Interactions
1981 - 1987

CHARACTERISTICS	1987 (N=52)	1986 (N=53)	1985 (N=58)	1984 (N=56)	1983 (N=53)	1982 (N=51)	1981 (N=53)
Frequency of Contact:							
4 = More than monthly	44 %	43 %	24 %	35 %	28 %	29 %	26 %
3 = Monthly	21	21	39	19	30	18	26
2 = Occcasionaly (6-11 x/yr)	15	23	28	26	28	33	21
1 = Infrequently (1-5 x/yr)	17	11	7	16	9	10	19
0 = Never	2	2	3	4	4	8	8
Frequency Index	2.9	3.0	2.8	2.7	2.8	2.6	2.5
Nature of Contacts:							
Advisory Committee	48 %	64 %	53 %	53 %	60 %	53 %	62 %
Meetings, Workshops, Conferences	56	68	74	46	70	73	64
Materials	44	49	40	49	40	43	36
SEA/HS collaboration	23	38	28	33	28	37	42
LEA/HS collaboration	4	2	9	12	15	14	9
SEA used as provider	19	25	5	18	9	20	8
RAP used as provider	33	40	24	21	32	16	26
Information exchange	96	92	93	91	91	82	85
Mutual project	38	49	22	37	25	22	9
*State Planning Grant		26	17	14	6	2	4
*Preschool Incentive Grant		11	-	-	-	-	-
Other	46	43	33	46	34	33	8
Introductory contact	4	8	2	2	2	8	17
None	0	2	3	4	4	8	8
Average No. Types of Contacts	4.2	5.5	4.1	4.2	4.0	4.1	3.9
Satisfaction:							
Excellent (4.0)	54 %	58 %	55 %	49 %	53 %	47 %	45 %
Good (3.0 - 3.9)	31	26	31	26	34	39	34
Fair (2.0 - 2.9)	6	8	5	12	2	4	2
Poor (1.0 - 1.9)	0	2	3	0	0	0	2
No opinion (1.0)	4	2	5	9	6	8	6
Opinion Excluded	6	4	0	4	6	2	11
National "Grade"	3.5	3.5	3.5	3.3	3.5	3.3	3.4
Problems encountered in dealing with RAP:							
No	85 %	89 %	97 %	91 %	98 %	98 %	89 %
Yes	13	8	3	5	2	2	11
Don't know	2	4	0	4	0	0	0

*These categories of responses were eliminated from the 1987 survey.

Using a four-point index to express the frequency of contact RAPs scored 2.9 compared to 3.0 during last year (where 4 means more often than monthly; 3 means monthly; 2 means occasional, that is between six and 11 times annually; and 1 means infrequently, or fewer than five times per year; and 0 means never).

SEAs served by University of Maryland, Chapel Hill, and Mississippi RAPs had more frequent communication than in the past. New England RAP maintained its level of contact, and all other RAPs had less frequent contact with SEAs.

Nature of Contacts

All of the SEAs interviewed had had some kind of contact with RAP. Almost all, 96 percent, had received information via mail, telephone, or in person. More than half (56%) had been at meetings and workshops together, either as presenters or participants. About half (48%) indicated that they had been invited or had attended RAP advisory committee meetings. Forty-four percent of the SEAs cited some kind of project with which they and RAP were mutually involved. One-third of the SEAs used RAP in some fashion as a provider. These and other types of contacts will be discussed more thoroughly below.

On the average, the SEAs cited 4.2 types of contact with RAP in 1987 (see Table 4.17). Although a reduction from 5.5 the previous year, the level was consistent with that of the preceding five years. (In part, the reduction in the number of types of contacts was due to the removal of two categories which were dropped from the survey, State Planning Grant and Preschool Incentive Grant.) Nonetheless, there was a real reduction in all but three types of contacts and those categories (LEA collaboration, information exchange, and "other") showed insignificant change, or none at all.

The types of contacts which had the largest reduction were among those which required intensive time and personal involvement. They were:

	Percent citing in	
	1987	1986
Advisory committee meetings	48	64
Meetings, workshops, conferences	56	68
SEA/Head Start collaboration	23	38
Mutual projects	38	49

The RAP advisory committee was one area of contract performance whose level of effort was reduced due to the Gramm-Rudman budgetary cuts.

Meetings, workshops, and conferences were also cited by fewer SEA respondents. The decrease appeared among events sponsored by SEAs rather than by RAPs. In the telephone interviews analysts recorded who sponsored the event and whether the party attended or presented at the event. Findings for RAP-sponsored events were very similar to those of the previous year.

- SEA attending a RAP event was cited by 31 percent of the SEA respondents this year, versus 34 percent the previous year.

- SEA presenting at a RAP event was cited by 29 percent of the respondents in both years.

The decrease in the number of SEAs citing meetings, workshops, and conferences occurred for those sponsored by SEAs and at which RAPs presented or attended, as seen below.

- RAP attending an SEA event was cited by 12 percent of the SEAs versus 32 percent in the previous year.
- RAP presenting at an SEA event was cited by 12 percent versus 19 percent the previous year.

The reduction in SEA/Head Start collaboration may be due to the fact that most states have had some kind of formal agreement between Head Start and the SEA. Nonetheless, in this year of new federal legislation, analysts were surprised by the finding.

Although there were fewer mutual projects compared to the previous year, there were more than in any other previous year. The most typical project of this nature was the co-sponsorship of a conference. SEAs in Colorado, Arizona, Nevada, Idaho, Arkansas, Oklahoma, Nebraska, Maryland, Illinois, Indiana, and Ohio mentioned these. SEAs in Texas and Minnesota discussed joint planning meetings held with RAP. Other mutual efforts were: a task force on planning smooth transition from Head Start to public schools cited by the representative from Ohio; a statewide assessment of needs in Colorado; an effort by RAP and the state of California to better serve Indian and migrant children with handicaps; a brochure which RAP prints for the state of Arizona, as well as a self-evaluation project; and finally, in Kentucky, a meeting between RAP and the SEA which produced a list of problems common to both agencies and which they plan to address together.

To underscore the lessening of contacts that take place in person, analysts looked into the means by which information was exchanged this year compared to the previous one. As mentioned before the exchange of information was cited by almost every SEA (96%) and this compared similarly to the previous year when 92 percent of SEAs cited it. Yet, comparing how these exchanges occurred showed a drop in the personal exchanges:

- information via telephone: 69 percent of SEAs reported this compared to 73 percent in the previous year.
- information via mail: 63 percent of SEAs reported this compared to 71 percent in the previous year.
- information exchange in person: 29 percent of SEAs reported this compared to 62 percent in the previous year.

Many SEAs (44%) cited media and materials they had received from RAP. The list of examples is long and includes: a family needs' assessment, the RAP census of children with handicaps, addresses of Head Start programs and the names of contact persons, a packet on transition practices, a slide-tape on PL 99-457, the Head Start manuals on handicapping conditions, the federal cooperative agreement between Head Start and the Office of Special Education Programs, RAPs' monthly resource packets, a report on the status of PL 99-457, software for use at the preschool level, videotapes, and workshop materials.

Several SEAs mentioned ways in which RAP had provided a special service to them. These were classified in the category "RAP used as provider." The list shows the responsiveness of the RAPs to the individual needs of the SEA and includes some of these examples: providing samples of written collaborative agreements from a variety of states, recommending a site for training, offering names of consultants, providing mailing labels with Head Start names and addresses, referring children, clarifying Head Start policy relating to services to children with handicaps, providing statistical data on Head Start's services to children with handicaps, proposing ways to use films at training, mailing notices from SEAs to Head Start programs, planning for conferences, and offering advice on items for an SEA newsletter.

Many examples of interaction between RAPs and SEAs were classed as "other" because they did not fit into existing categories. SEAs cited 25 examples of "other" types of contacts. The most common was mutual membership on committees whose intent was to advise, usually the SEA, on early childhood issues, or provide services for children with handicaps, or both. SEAs in 12 states (Maryland, Mississippi, Missouri, Oregon, Washington, Georgia, Alabama, Illinois, Colorado, Arizona, California, and North Carolina) cited such committees. Four of these committees (in Maryland, North Carolina, Mississippi, and Arizona) were the state Interagency Coordinating Council required by PL 99-457.

In New Hampshire and Missouri, RAPs worked with SEAs to locate a placement for children. A special effort occurred in Region VII where, at the initiative of the Assistant Secretary of HHS, RAP, SEAs, and other agency representatives met to discuss collaboration on serving young children with handicaps. Representatives from Iowa, Kansas, and Nebraska mentioned the beneficial outcomes of the meetings. The Missouri SEA representative related that RAP paid for presenters to the SEA-sponsored conference in that state. Other mentions included training provided by RAP to an LEA in Wisconsin and attendance at professional meetings in Utah, Nebraska, Michigan, and Arkansas.

SEA respondents in Rhode Island and Hawaii stated that RAP had made an introductory contact to familiarize them with the work of the RAP and with the Head Start mandate to serve children with handicaps. In the case of the SEA from Rhode Island, the introduction came within the first week on the job.

Satisfaction

To obtain a measure of the overall performance of the RAPs in their task of collaborating with SEAs, interviewers asked SEA respondents to rate their satisfaction with RAP's work using a four-point scale, like an academic grade-point index. For the third consecutive year, the rating measured 3.5. Three respondents (in Tennessee, Montana and Hawaii) were unable to give a rating because they were new to their positions. These were eliminated from the computation. For two respondents who were unable to express a rating because they had had so little contact with RAP, the analysts assigned a score of one, in effect penalizing the RAP. (This convention has been used since the beginning of the telephone survey of SEAs to promote frequent exchanges between the RAPs and SEAs.)

For five RAPs, satisfaction scores increased over the previous year. Six RAPs had lower scores. Three of the latter group were RAPs that had additional territories to serve this year. Chapel Hill acquired three new states, as did Great Lakes. PSU had one additional state to serve. While the satisfaction scores at these three projects did drop, the decrease was small, and all three have maintained scores above the average for the network.

Region VII RAP received a perfect score from each of the four states it served and had the highest rating overall. It also tied SWHD for the highest number of types of contacts. NYU, with a rating of 3.9, has steadily increased satisfaction among the states it serves and this year re-established a sound pattern of delivery with Puerto Rico and the Virgin Islands. Chapel Hill, Great Lakes, and SWHD also had among the highest scores, each with 3.8, and all with additional states to serve in this year. Also noteworthy was the increase in satisfaction expressed by the states served by the University of Maryland RAP, particularly in Maryland and West Virginia.

The only RAP to receive a disproportionately low rating was Texas Tech where infrequent contact in three of its states depressed the score. However, concentrated collaborative efforts in the state of Texas were viewed most positively and the state of Louisiana looks forward to a return to their very effective role of bringing different constituencies together for the purpose of long-term planning.

The unprompted comments in interviews with the representatives of State Education Agencies attested to the mutually beneficial relationship that exists between RAPs and SEAs and they added substance to the rating as an expression of satisfaction. A selection of these comments is presented below:

RI: We have laid the groundwork on an interagency task force so that when the state implements PL 99-457 we will see Head Start as a viable placement. RAP is most helpful, most cooperative, and resourceful with a style that makes you want to listen and be open.

VI: RAP is wonderful, very proactive. They touch all bases and are punctual. We get materials right away. They are very helpful -- like a godsend, an extended hand.

MD: I've been really pleased. A good relationship has been strengthened. There is a lot of activity.

KY: RAP is key in the facilitative role in Kentucky. This is the most active effort we've ever had in the state and it has been only two years with RAP. I've been an SEA for 12 years. In this time Chapel Hill has the best, the most responsive staff capable of understanding programs. No one can approach their ability to access information. They are facilitators and partners. They make our job easier. We don't need programs that make us work harder. There is such integrity from Chapel Hill. It's a blend of creativity and integrity.

MS: I like working with RAP staff. They are very polite and cordial and I enjoy their contacts.

WI: They select timely topics and give good presentations. They are also trying hard to use people from within the state. The material at training is great; it is professional quality. It reflects knowledge of adult education as well as special education.

LA: PL 99-457 offers a rare second chance for Head Start to assert itself and the mainstreaming concept. Next year is an excellent year for RAP to work harder in the state, doing what it has done in the past (facilitating discussion between SEA, LEA, Head Start Directors, technical assistance providers, etc.)

NE: I see an increased role for RAP and Head Start with PL 99-457. RAP is so conscientious and professional at all levels. They are on top of PL 99-457 and always share information immediately. RAP has facilitated a lot that we might have put off. We always get farther down the road because of RAP. RAP is a stable organization. It means so much to a good ongoing work relationship. Please continue funding.

SD: I predict increasing SEA/public school reliance on Head Start materials, training, and expertise in working with parents and families. In my opinion, Head Start has been more involved in this than schools until now, but PL 99-457 changes that.

CA: RAP cooperates with us a lot. I'm pleased with training turnout. I haven't seen so much turnout in North California because they took time to go on-site. They are responsive and flexible. I am very pleased.

OR: It is amazing how RAP is stretched over a huge geographic area, yet maintains the quality of services. They do a lot of collaborative work. They have real expertise with training. The quality of service is excellent.

Suggestions

When asked by interviewers, 65 percent of the SEA respondents offered suggestions for improving RAPs' work, some offering more than one. In total, 40 suggestions were made. More than twice the number of SEAs offered suggestions compared to the previous year. The increase in suggestions may have been attributable to the added emphasis on interagency collaboration required by PL 99-457.

As has always been the case, the majority of these suggestions indicated a strong working relationship between RAPs and SEAs. Most wanted a continuation or more of the services they now receive. The suggestions of this nature fall into the types listed below:

- New and different ways to collaborate (Idaho, Delaware, Puerto Rico, Illinois, Alabama, West Virginia)
- Continued or reinstituted activity (Pennsylvania, Connecticut, Missouri, Arizona, Wyoming)
- More training on a proposed subject (Alaska, Michigan, Puerto Rico, Maine)
- More RAP staff (Indiana, North Carolina, Georgia, Oregon)
- More interaction or information about Head Start (Mississippi, Ohio, Delaware)

- More RAP services available locally (Nevada, Kansas)
- More steady financial base for RAPs (Kentucky, Rhode Island)

The other suggestions have a tone suggesting the need for improvement.

- More contact with RAP (New Mexico, Louisiana, Oklahoma, Pennsylvania, Delaware, North Dakota, Alaska)
- Correction of a problem or clarification of a role of RAP (Minnesota, Hawaii, Arkansas, Colorado, South Dakota)

Problems

Seven SEAs expressed some problem in their dealings with RAP. Most of these are particular to some situation at a given RAP. However, the theme of limited contact once again appears in Michigan, Louisiana, and New Mexico. The respondent from Minnesota wants more purpose brought to RAP advisory committee meetings. In Arkansas, communication with the RAP is a problem, as it was previously. The Colorado representative remarked on the vacancies left among RAP staff and criticized the administering sponsor for the delay. The Alaska respondent stated a need for more funding for RAP to travel to Alaska to fill the gap in service delivery there.

As one might anticipate, in a year marked by severe programmatic budget cuts, problems occurred. The dramatic decrease in travel funds was felt by the SEA clients served by RAP. But for the most part, RAPs maintained their strong pattern of service delivery.

Most Valuable Service

High satisfaction scores and a low incidence of problems attest to the value of RAPs' service. Each SEA was asked what they felt was the most valuable service offered by RAP.

All SEAs responded, except for three which were either too new to their positions or had had too little contact with RAP. Forty-two percent responded by citing more than one service.

The most valued service was RAPs' ability to be a resource to the SEA and this was cited by 40 percent of the respondents. To this group, RAP has been a mediator, a supplier of information on nationally important issues, and a source of information about Head Start in a particular state. Training was valued highly by 33 percent of the respondents. For 23 percent, the most valuable service was RAPs' ability to link SEAs with Head Start programs, especially in the absence of a state-level Head Start office. Twelve percent identified RAPs' collaborative efforts as those most highly valued. Others (6%) mentioned the RAP advisory committee as extremely useful in obtaining the perspective of other SEAs and viewing their approach to the mandate to serve young children with handicaps. Six percent said that the services, other than training, which RAP provided to Head Start programs was most valuable. Finally, there were two SEAs that praised unique features of the Texas Tech RAP (TIP and toll-free phone access).

The number of SEAs (48) responding to this question is, in itself, demonstrative of RAPs' value and directly parallels the situation in the previous survey. Yet, this year SEAs responded with fewer citations, 75 compared to 96 last year. There is an expected correspondence between the lower number of types of contacts and the depreciation in numbers of services cited as most valuable.

State and Local Collaboration: The RAP Perspective

The RAPs had their own perspectives on implementation of the highly visible task of interagency collaboration. Sometimes emphases differed from those of their SEA counterparts. A RAP, for example, might find it more significant than the SEA that Head Start or RAP had representation on an Interagency Coordinating Council. In other cases, both the RAP and the SEA emphasized the outcome of the same project.

From the time it first appeared in the FY'78 contracts, the assignment to collaborate has posed numerous challenges to RAPs. Efforts had to be tailored to respond to policies, practices, and predispositions which could vary dramatically from state to state. After years of steadily cultivating professional collaborative relationships with SEAs, RAPs found new impetus with the passage of PL 99-457. This legislation provided strong incentives for Head Start, public schools, and community agencies to work more closely together. RAPs started work immediately to ensure Head Start (or RAP) representation on, or at the least input into, each state's planning body. In 1986-87, invitations were extended to University of Maryland, Chapel Hill, Mississippi, Region VII, Denver, and SWHD RAPs to sit on Interagency Coordinating Councils, or variations thereof, in Maryland, North Carolina, Georgia, Mississippi, Missouri, Kansas, Colorado, Arizona, and California.

University of Maryland RAP developed state-by-state guidelines on the implementation of PL 99-457 that addressed Head Start collaboration. A slide tape show written and disseminated by Chapel Hill RAP on the subject was a useful mechanism for explaining the law and stimulating discussion. The Mississippi RAP, the Jackson LEA, and a developmental program worked together in developing guidelines for the SEA on program options in serving preschool handicap children under PL 99-457. Great Lakes RAP got Illinois Head Start involved in ad hoc committees to plan grants which Head Starts hope will continue as official involvement on the Interagency Coordinating Council under PL 99-457. The RAP and Head Start Association also worked together on a response draft application to the Illinois Department of Education under PL 99-457. Nebraska Head Start grantees were encouraged by Region VII RAP to apply for positions on the birth-to-five Interagency Coordinating Council. In Nevada, RAP was involved in planning efforts to include Head Start in the state plan for PL 99-457.

At a more general level, RAPs organized meetings and training events to familiarize directors and handicap coordinators with PL 99-457. Great Lakes got SEAs together at a DEC meeting to discuss the new legislation. Region VII, as well as Denver RAP, invited HHS Assistant Secretary Jean Elder to meet with state early childhood and special education personnel to discuss how PL 99-457 might be implemented in each state, what the implications were for Head Start, and common concerns. RAP staff also found themselves answering questions about Head Start practices to validate the program's qualifications to serve not only the very young but also at-risk children.

Much interest has been paid over the years to the facilitation of formal collaborative agreements between SEAs and Head Start. This year two were added to the roster, Vermont and Texas, bringing the total number of agreements to 48. Table 4.18, Existing SEA/Head Start Agreements As Reported by RAPs, 1979 1987, and Table 4.19, Abbreviated Contents of SEA/Head Start Collaborative Agreements. This total includes Arizona, Arkansas, and New Jersey even though the relationship comes not through formal signed agreements but via a memo, state plan, or legislation which includes Head Start. Although agreements have now been drawn up in most states and territories, they must be maintained. These require regular review and sometimes revision, particularly now in light of PL 99-457.

RAPs continued with well-established collaborative practices. SEAs were invited to serve on RAP advisory committees. University of Maryland RAP assigned the task to facilitate collaborative agreements to their advisory committee. Chapel Hill RAP restructured their Advisory Committee to be composed of SEAs and Head Start Association personnel and included the committee in their summer planning meeting. RAPs and SEAs present at each others' workshops and conferences and occasionally co-sponsor conferences. RAPs made a point in 1986-87 of inviting SEAs to handicap coordinator meetings and Head Start Association meetings. For the first time, many SEAs recognized the substantive contributions Head Start is making. RAP negotiated invitations for Head Start to SEA training events and vice versa in Region III. The network included SEAs in all relevant mailings. Some RAPs (e.g., U. of Md RAP) provided PIR data for each state to their SEAs. And finally, RAP served on a number of task forces, advisory councils, steering committees, and program committees.

Some efforts were particularly notable. University of Maryland RAP encouraged the use of SEA staff on Head Start peer review teams. Chapel Hill RAP held Health/Handicap Awareness conferences in each state to introduce state-level personnel involved with services to young children with handicapping conditions to Head Start capabilities. As a member of the State Interagency Council, Mississippi RAP helped sponsor Networking Conferences to increase communication and collaboration among a variety of programs working with preschool handicapped children throughout the state. PSU RAP was instrumental in getting ACYF to fund 25 slots for Head Start at the Washington Office of Special Public Instruction's Summer Institute.

Collaboration with Local Education Agencies (LEAs)

A second dimension of the RAP collaboration task is to facilitate cooperation at the local level, principally through training and technical assistance to Head Start programs.

Several RAPs conducted training on the nuts and bolts of how to obtain, write, and implement collaborative agreements at the local level. The transition between Head Start and public school was a major training topic for Mississippi RAP. Great Lakes RAP, too, included this on their agendas, sometimes using LEAs as presenters. Texas Tech RAP arranged for handicap specialists from Texas Regional Education Service Centers to present at three mainstreaming conferences; several later provided special services and training to Head Start grantees. Region VII RAP involved Nebraska Education Service Units in the planning of their annual state conference. Frequently RAPs extended open invitations to LEAs to attend their conferences and workshops; NYU, for example, in their "bring a friend" campaign, encouraged Head Starts to consider LEAs as guests.

Table 4.18
Existing SEA/Head Start Agreements As Reported By RAPs, 1979-1987

		Title of Agreement	Signing Parties
Region I	CT	Interagency Agreement between the Connecticut Department of Education and Administration for Children, Youth and Families	Commissioner, Department of Education ACYF[1]
	MA	Interagency Agreement between the Massachusetts Department of Education and the Administration for Children, Youth and Families	Commissioner, Department of Education ACYF
	VT	Memorandum of Understanding Between the Vermont Head Start Directors Association and the Vermont Department of Education	Commission of Department of Education ACYF
Region II	NJ	Agreement for Services 1980-81	Issued by the Interdepartment Committe for Education to the Handicapped
	NY	Memorandum of Mutual Understanding	Executive Deputy Commissioner, State Education Department ACYF
	PR	Cooperative Interagency Agreement for the Delivery of Services to Handicapped Children	Department of Social Services Department of Labor Department of Services Against Addicti Department of Housing Department of Public Education
	VI	Interagency Agreement	Commissioner of Education Virgin Islands Community Action Agency
Region III	DE	Statement of Agreement of Collaboration between Delaware Head Start Programs and the Delaware Department of Public Instruction, Exceptional Children/Special Programs Divisions	State Director, Exceptional Children/ Special Programs ACYF
	MD	Signed Statement of Intent	Liaison, State Department of Education Head Start Training Officer
	DC	Statement of Agreement of Collaboration between UPO Head Start Programs and the Division of Special Education and Pupil Personnel Services D.C. Public Schools	UPO Head Start District of Columbia Public Schools
	VA	Statement of Agreement of Collaboration between Virginia Council of Head Start Directors and the Virginia Department of Education	Virginia Council of Head Start Directors Virginia Department of Education, Division of Special Education Programs and Pupil Personnel Service
Region IV	FL	An Agreement between the Department of Community Affairs and the Department of Education on Behalf of Handicapped Children in Head Start Programs	Commissioner, Department of Education Secretary, Department of Community Affairs
	NC	Cooperative Agreement between North Carolina State Department of Public Instruction/Division for Exceptional Children and Administration for Children, Youth and Families	Department of Public Instruction ACYF
	GA	Cooperative Agreement between the Georgia Department of Education Office of Instructional Services Division of Special Programs and the Georgia Head Start Programs	State Superintendent of Schools ACYF
	KY	Joint Memorandum of Agreement Between Kentucky Department of Education and Kentucky Head Start Network (Represented by and under Region IV ACYF)	Superintendent of Public Instruction, Department of Education ACYF
	MS	Agreement Between Mississippi State Department of Education and Administration for Children, Youth and Families, Region IV	Mississippi State Superintendent of Education ACYF
	AL	Interagency Agreement Between the Alabama State Department of Education and The Administration for Children, Youth and Families, Region IV, Head Start, U.S. Department of Health and Human Services	State Department of Education ACYF

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[1] ACYF connotes a signature by the ACYF Regional Program Director or Acting Director

		Title of Agreement	Signing Parties
Region V	IL	Memorandum re Current Relationship between Public Schools and Head Start Programs, in the Delivery of Comprehensive Services to Three through Five Year Old Children with Handicaps (Updated 8/81)	State Superintendent of Education Chairperson, Illinois Association of Head Start Directors
	OH	Memorandum of Agreement between Ohio Division of Special Education and Ohio Head Start Handicap Services Advocate (Updated 12/80)	Director, Division of Special Educatio Ohio Head Start Handicap Services Advocate
	MN	Joint Statement of Policy between the Minnesota State Department of Education and Head Start Programs in Minnesota	Commissioner of Education ACYF
	MI	Joint Statement of Agreement between Special Education Services Area of the Michigan Department of Education and Region V ACYF and Michigan Head Start Association	Director, Special Education, Department of Education ACYF Minnesota Head Start Association
	WI	Joint Statement of Agreement between the Wisconsin Department of Public Instruction and Head Start in Wisconsin	Department of Public Instruction ACYF
Region VI	LA	An Agreement Concerning the Implementation of Act 754 of Louisiana Legislature of 1977	Superintendent, State Department of Education ACYF
	OK	Letter of Agreement between the Special Education Section Oklahoma State Department of Education and the Oklahoma Head Start Programs	State Superintendent of Public Instruction Director, Division of Economic Opportunity Director, Head Start T/TA
	AR	No signed agreement, but Head Start applies to SEA for funds generated through participation in Child Count, and receives funds directly	
	TX	Cooperative Agreement	Texas Education Agency ACYF
Region VII	KS	HeadStart-Kansas State Department of Education Cooperative Agreement	Commissioner, State Department of Education ACYF
	IA	Memorandum of Understanding Between Iowa Department of Public Instruction and Region VII Administration for Children, Youth and Families, Office for Human Development Services, U.S. Department of Health and Human Services	Commissioner of Public Instruction ACYF OHDS President, Iowa State Head Start Director Assn.
	NB	Head Start-Nebraska Department of Education Cooperative Agreement	Nebraska Education Agency ACYF
Region VIII	ND	Collaborative Agreement between the North Dakota Department of Public Instruction/Special Education and Region VIII, Administration for Children, Youth and Families	Department of Public Instruction ACYF
	SD	Cooperative Agreement between the Section for Special Education (SEA) and Region VIII Administration for Children, Youth and Families	Director of Special Education ACYF
	UT	Utah State Office of Education/Regional Head Start Cooperative Agreement	State Superintendent ACYF
	CO	Amendment between Federal Region VIII Administrators for Children, Youth and Families and the Colorado Department of Education	Commissioner of Education ACYF

		Title of Agreement	Signing Parties
Region IX	AZ	Arizona Head Start grantees have contracted with the Arizona Department for Part B-EHA LEA Entitlement Funds	
	CA	Interagency Agreement between the State Department of Education/Office of Special Education and the Administration for Children, Youth and Families, Region IX, Head Start, U.S. Department of Health and Human Services	State Department of Education ACYF
	HA	Agreement between the Department of Education, State of Hawaii and Head Start Programs in Hawaii	Superintendent, Department of Educati Directors, Hawaii Head Start Grantees
	Palau	Interagency Agreement between the Government of Palau Health Services, Education/Special Education Department adn the Head Start for the Provision of Health Services and Education Services	Health Services Education Department Palau Community Action Agency
Federated States of Micronesia Ponape		Interagency Agreement	Ponape Special Education Coordinator Vocational Education Supervisor Vocational Rehabilitation Coordinator Ponape Head Start Coordinator
Federated States of Yap		Handicapped Children, Youth and Adult Inter-Agency Agreement	Director, Department of Education Special Education Coordinator Acting Director, Health Services Public Health Officer Yap Head Start Director
	Guam	Memorandum of Agreement	Division of Special Education Head Start
	Truk	Memorandum of Agreement Among Agencies, Department of Health, Department of Education and Head Start of Truk	Department of Education Department of Health Services Head Start of Truk
	Marshall Islands	Interagency Agreement between Vocational Rehabilitation, Vocational Education, Head Start Program, Special Education, Public Health	Special Education Vocational Rehabilitation Vocational Education Head Start Health Services
American Samoa		Memorandum of Agreement Among Agencies: Department of Health Services, Public Health Division; Department of Education, Special Education Division, and Early Childhood Education Program, Head Start of American Samoa	Department of Health Services Department of Education Special Education Division Early Childhood Education Program/ Head Start of American Samoa
	CNMI	DATA NOT AVAILABLE	
Region X	ID	Interagency Agreement between the Idaho Department of Education and the Department of Health, Education and Welfare, Region X, Administration for Children, Youth and Families	State Superintendent of Public Instruction ACYF
	WA	Interagency Agreement between the State of Washington, Office of Superintendent of Public Instruction and the Department of Health, Education and Welfare, Region X, Administration for Children, Youth and Families	State Superintendent of Public Instruction ACYF
	OR	Interagency Agreement between the Oregon Department of Education and the Department of Health and Human Services Region X, Administration for Children, Youth and Families	Department of Education ACYF Portland State Universityi RAP
	AK	Memorandum of Agreement between State of Alaska, Department of Education, Administration for Children, Youth and Families/Region X, and Indian Migrant Program Division	Commissioner, State Department of Education Acting Commissioner, ACYF Administrator,Office of Special Servic Regional Administrator, Office of Huma Development Services

Table 4.19

Abbreviated Contents of SEA/Head Start Collaborative Agreements

	STATES																																					
	AL	AK	AZ	AR[4]	CA	CO	CT	DE	DC	FL	GA	HI	ID	IL	IA	KS	KY	LA	MD[4]	MA	MI	MN	MS	NE	NJ	NY	NC	ND	OH	OR	OK	SD	TX	UT	VA	VT	WA	WI
Signers of Agreements[1]																																						
ACYF	x	x	NA	NA	x	x	x	x			x		x		x	x	x	x		x	x	x	x	x	NA	x	x	x		x		x	x	x		x	x	x
HS									x	x		x		x	x						x														x			
Other Agencies	x														x																							
HS Contractor																			x										x	x	x							
Facilitators[2]																																						
RAP	x	x	x		x	x	x	x	x		x	x			x	x		x		x		x	x	x		x	x	x		x		x	x	x	x	x	x	
Other				*						x			x*	x*			x*		x		x*				x				x*		x*							x*
Key Points of Agreements[3]																																						
Identification					x			x	x	x	x		x	x	x		x	x				x		x	x	x	x		x	x	x		x		x		x	
Child Count/Child Find	x	x	x		x	x		x	x	x	x	x	x	x	x		x			x		x	x			x	x	x	x		x		x	x	x		x	x
Screening	x	x			x	x	x	x	x		x	x	x	x	x	x		x		x		x	x			x	x		x						x	x	x	x
Assessment	x	x			x		x		x		x	x	x	x	x	x	x	x				x	x	x				x	x		x		x	x	x		x	x
Diagnosis		x			x	x					x	x	x	x	x	x		x		x				x					x	x	x	x			x		x	
Referral	x	x			x	x	x	x		x	x	x	x	x	x	x						x	x		x	x					x	x	x			x		x
Placement	x				x	x	x	x	x		x	x	x	x	x		x	x		x		x				x				x	x						x	x
Dual Enrollment					x	x		x	x	x	x			x								x											x		x			
Direct Services		x			x	x	x					x		x	x	x						x			x							x	x		x	x	x	x
IEPs	x	x			x	x	x	x		x	x	x	x	x	x	x		x			x	x		x		x	x	x			x	x	x	x	x	x	x	x
Transition Planning	x	x			x	x		x	x	x	x		x	x	x			x				x	x		x	x	x	x		x				x	x	x	x	x
Information/Data Sharing	x					x		x	x	x	x		x	x	x	x	x			x		x	x	x	x	x		x	x	x	x		x		x	x	x	
Shared T/TA	x	x			x	x	x	x	x	x	x	x	x	x	x	x	x	x		x	x	x	x	x	x	x	x	x	x	x	x	x		x	x	x	x	x
Training on Collaboration						x	x							x		x						x		x			x										x	
Transportation		x				x								x								x														x		x
Equipment/Material Sharing						x				x						x										x		x	x									
Encourage LEA/HS Agreements		x				x	x			x	x			x	x		x	x		x	x	x				x	x	x		x		x		x	x		x	x
HS gets $ thru SEA	x		x	x						x			x							x						x	x	x						x			x	
Identifies RAP		x				x					x	x	x			x							x	x	x	x	x		x	x	x	x					x	
Renegotiate/Review Annually	x	x			x	x	x				x				x	x		x				x		x		x		x		x			x					x

	U.S. TERRITORIES									
	GU	MIs	PAL	PON	PR	TRU	VI	YAP	AS	CNMI[4]
Signers of Agreements										
ACYF										
HS	x	x	x	x	x	x	x	x	x	
Other Agencies		x	x	x	x	x		x	x	
HS Contractor										
Facilitators										
RAP	x	x	x	x		x		x	x	
Other					x		x			
Key Points of Agreements										
Identification	x				x		x			
Child Count/Child Find			x							
Screening			x	x	x	x	x	x	x	
Assessment	x	x	x	x	x	x		x	x	
Diagnosis			x	x	x	x	x	x	x	
Referral		x	x	x	x	x	x	x	x	
Placement	x		x	x	x	x		x	x	
Dual Enrollment										
Direct Services	x		x	x	x	x		x	x	
IEPs	x		x	x		x		x	x	
Transition Planning										
Information/Data Sharing		x			x					
Shared T/TA	x		x		x		x			
Training on Collaboration							x			
Transportation			x	x	x	x	x	x		
Equipment/Material Sharing						x	x	x		
Encourage LEA/HS Agreements		x								
HS gets $ thru SEA										
Identifies RAP										
Renegotiate/Review Annually										

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1. SEA is a signer of all agreements; ACYF=Regional Office program director or acting director; HS=Head Start grantees; Other Agencies=Health, Voc. Ed., Social Services, etc.; HS Contractor=RAP, STO, T/TA provider, state handicap advocate; etc.; NA=not a formal signed agreement, e.g., HS included in a memo, state plan or legislation;
2. Other=HS Advocate, STO, etc.; *=RAP assisted;
3. Contents not inclusive;
4. Contents of agreements not available.

Another form of facilitation came as technical assistance from the RAPs. Mississippi RAP facilitated transition plans between LEAs and 13 Head Starts in 1986-87. The role of facilitator sometimes simply meant sharing information and sometimes meant actually developing a transition plan with all parties. Contact was made with each additional agency to assist them in updating previous plans. SWHD RAP also facilitated transition plans between Head Starts and LEAs. Region VII and Denver directly facilitated meetings between programs helping them to clarify issues and common ground. Great Lakes provided technical assistance to at-risk Head Start programs and responded to some requests for service from LEAs. PSU made on-site visits where requested to facilitate Head Start/LEA collaboration.

RAPs typically augmented local collaboration in the following ways: provided samples of LEA agreements; disseminated and sometimes developed materials (e.g., Mississippi RAP's *Developing a Collaborative Transition Plan*) and up-to-date information on the impact of local policy legislation and regulations on Head Start; included LEAs on advisory committees; and used local education personnel as consultants to encourage local use and referrals.

RAPs also approached this task in some particularly interesting ways:

Both University of Maryland and Chapel Hill RAPs conducted surveys on the status of LEA/Head Start agreements in particular states.

NYU's Handicap Coordinators' Conference included site visits to specialized and early childhood facilities.

Mississippi RAP used SEA and Interagency Coordinating Council members to explore which LEAs are responsive to dual enrollment with Head Start.

Mississippi RAP worked with Jackson LEA to facilitate enrollment of a severely handicapped child into Hinds County Head Start.

Mississippi RAP, in its capacity as a member of the State Interagency Council, selected local preschool collaboration efforts to fund as mini-grants. When Head Start had been omitted, RAP pointed out to potential grantees that some programs had been overlooked and to go back and include Head Start as collaborators.

Region VII RAP wrote a memo encouraging Head Starts in their service areas to work with LEAs in various ways and disseminated it along with a memo from the director of the Office of Special Education Programs at the U.S. Department of Education. The latter outlined policy regarding educating preschool-aged children with handicaps in the least restrictive environment. LEAs are instructed to "determine whether there are any preschool programs [e.g., Head Start] to which the program for children with handicaps may be linked on even a part-time basis."

Region VII chose an LEA as the site for the filming of its videotape on positioning and handling children with physically handicapping conditions.

Region VII helped the Omaha Head Start and LEA design a follow-up study for handicapped Head Start children once they had entered school; they also fostered collaboration by helping the Lincoln Head Start and LEA work out a plan for the LEA to provide speech therapy services.

SWHD RAP was instrumental in securing services from LEAs for Head Starts in unserved or underserved populations, especially Indian and migrant Head Starts. The result was a written memo from SEA to all SELPA directors requiring assessment and therapeutic services to all eligible Indian children. An informal written agreement between LEAs and migrant Head Starts in target counties insured diagnostic evaluations for migrant children to be conducted by school personnel during the summer months when they are ordinarily not on staff.

Collaboration with Other Agencies Serving Young Children with Handicaps.

A number of agencies and programs not affiliated with public education systems have served very young children with handicapping conditions and their families. RAPs understood the need for ongoing networking among these colleagues even before it became an emphasis in the RAP scope of work. Benefits are reciprocal; it can be assumed that in each case the benefits to children are enriched.

The network has kept this perspective broad and inclusive in a number of ways. The most common collaborative roles or activities with other agencies in 1986-87 were:

- Loans of materials and sharing of materials by placing agencies on mailing lists.
- Joint training with other agencies, mutual invitations to each others' training; RAP's use of other staff as presenters or trainers; arrangement of low cost training and credits through local colleges and universities to staff working with young children.
- RAPs' participation on task forces, panels, local interagency councils, committees.
- Disseminating information about other agencies and resources, collaboration, or agreements.
- Encouraging Head Start grantees at the local level to replicate the networking model RAPs are using at the state and national levels.

Table 4.20, Other Agencies Collaborating with RAP, displays the agencies, groups, and organizations with which RAPs had continuing activity in 1986-87. It catalogs providers identified by the RAPs according to participation on committees, referrals, training, and collaborative agreements. Such activities as support of Head Start programs, materials, information sharing, and arranging for credit are included in the miscellaneous section.

Table 4.20
Other Agencies Collaborating with RAP

RAP	Participation on Committees	Presentation or Sharing of Training or Trainers	Collaborative Agreements	Miscellaneous	Meetings
New England		Chidren's Hospital		Children's Museum	
New York University	NY Developmental Disabilities Planning Council's Prevention Task Force	Early Childhood Direction Centers Visiting Nurses Association East River Child Development Center		Project NEST (Nurturing Establishes Strong Ties)	United Cerebral Palsy
University of Maryland	U. of Maryland's Department of Early Childhood Special Education's Advisory Board			U.S. Public Health Services National Head Start Mental Health Project	
Chapel Hill	National Transition Steering Committee	Health/Handicap Awareness Conferences			Florida Optometric Society
Mississippi	National Transition Steering Committee MESH MACUS (MS Assoc. of Children Under Six)	MS Conference on Social Welfare Child and Adolescent Service System Program Region IV SFC's Conference			TN HSA Region IV ACYF National Parents Association Governor's Special Comm. on Transition Mental Health Dept.
Great Lakes				IN Department of Mental Health	
Texas Tech University	Advisory Concil for TX Dept. of Human Resources on the Prevention of Child Abuse and Neglect	Region IV Public Health Service TX Regional Educational Service Centers			
Region VII		University of Iowa			
University of Denver		University of Wyoming First Start Rocky Mountain Adoption Exchange			
SWHD	Area II Board of Developmental Disabilities State of CA Infant/Preschool Plan AZ Consortium for Children with Chronic Illness Pilot Parents State Plan Grant Committee	AZ Department of Health AZ Division of Maternal Child Health AZ Division of Develop-Disabilities Pilot Parents		State Infant/Preschool Services	First Chance Consortium Infant Interagency Task Force Association for Supportive Child Care NAEYC CEC
PSU			Bureau of Indian Affairs	OR Early Intervention Programs ID Health and Welfare	

Below are highlighted some particular efforts demonstrating RAPs' industry:

- Region III RAP facilitated the establishment of a multidisciplinary, multi-agency diagnostic team in Washington, D.C.
- Chapel Hill RAP sponsored a Health/Handicap Awareness conference in every state in Region IV to increase awareness and collaboration among agencies serving young special needs children.
- Mississippi RAP served on an Interagency Case Committee that advised other agencies involving problems of securing services for handicapped children through Head Start.
- In Great Lakes RAP's service area, Ohio day care licensing required 15 hours of training annually. RAP facilitated credit for the training through RAP and the Head Start Association.
- PSU RAP sent "RAPSource" to the Early Intervention Programs in Oregon. In return, the state Mental Health Division did all packaging and mailing to these projects as well as Head Start grantees.

Changes in Practices Affecting Services to Young Children With Handicaps

Both RAPs and SEAs were asked whether there had been any changes in practices within states which affected services to young children with handicapping conditions. Both sets of interviews yielded information about changes in each state; information from a RAP was sometimes used to augment that of an SEA, and vice versa.

Of major significance in 1986-87 were states' decisions to participate in PL 99-457. Changes that occurred are categorized below under one of six headings: PL 99-457; Legislation/Mandates; Legislation Proposed but Not Passed; Practices, Policies and Programs; Committees and Councils; and Interagency Collaboration.

PL 99-457

MA More money is coming into the state because of PL 99-457 and the state is encouraging collaboration formally with Head Start: dual enrollment, therapists, etc.

ME The lead agency, Interagency Coordinating Council, made a major decision which ensures a multi-disciplinary approach to serving children. Uses a variety of placements: Head Start, day care, public school, etc.

NY New York decided to serve only five year olds for 1987-88.

DE The Department of Public Instruction has been appointed lead agency for the early intervention program. Children at risk for developmental delay are included in Delaware's eligibility criteria.

MD	The Governor's Office for Children and Youth has been designated as lead agency for the first year of implementation of the early intervention program.
WV	West Virginia will participate in Part H for infant and toddlers. Department of Health has been designated as lead agency's ICC.
GA	The Department of Human Resources was designated as lead agency for ages birth to two years/Part H instead of the SEA.
MS	PL 99-457 has increased the number of three- to five-year-old children being served in public school. The Health Department was chosen to be the lead agency serving ages birth to two years. The ICC was formed to advise the Health Department in this effort.
WI	Although it had been expected that the SEA would take the lead, Health and Human Services was designated as the lead agency.
MN	Minnesota SEA has been designated the lead agency for Part H of PL 99-457. Ann Bettenburg has encouraged Head Start participation in planning efforts.
MI	Special Education changes in Michigan were drafted during 1985-86 to be effective September, 1987. However, these changes are yet to be implemented due to pending pre-primary legislation. The Michigan Head Start Association continues to be actively involved on the Governor's Task Force, which was established to provide a coordinated effort between providers related to this legislation.
AR	By 1990 all PL 99-457 money will go through Educational Cooperatives (ECs) -- SEA says only certified teachers will be in programs. In the throes of implementing PL 99-457. Funneling new money through ECs which elect whether to contract with local Head Start programs for dual placements. Only six ECs have been funded. Each has hired a coordinator who is to go out to the school area and, with an advisory committee, will determine the type of program which suits its needs. There will be six pilots. One will go through Head Start, and another will do speech services only.
TX	Implementation of PL 99-457. Money has just now been released to the schools so won't know outcomes for awhile.
KS	Administering PL 99-457 money for three- to four-year-olds. Gearing up for PL 99-457 services in 1990. Health is the lead agency for infant/toddlers. Kansas has a delineation for "developmental delay" as a handicapping condition. Head Start may want to consider the same.
MT	Effect of PL 99-457 (teacher prep, training, etc.) felt especially for ages birth to two years because it is a new focus; state has always served preschool. Budget cuts throughout state.
UT	Education was given the lead role for three- to five-year-olds under PL 99-457, to be assumed from Social Services by September, 1988.
AZ	In establishing an Interagency Coordinating Council, hired a coordinator, a milestone.

CA Have a mandate for services for three- to five-year-olds needing intensive special services. Legislation now allows participation in PL 99-457 so money is available to the same age group needing less intensive services. A four-year phase-in trying to make smooth transitions so no dumping of children occurs from LEA to Head Star or vice versa. Collaborative agreement ensures against duplication of services between LEA and Head Start. Head Start is most responsive among the early childhood providers in California.

NV School districts have been successfully using PL 99-457 money in preparation for a continuum of placement options, etc.

Legislation-Mandates

CT State money has been appropriated for Head Start.

MA This year's state money for Head Start was earmarked for program expansion.

ME State appropriated funds to Head Start to be used for salary enhancement.

NH More federal money for three- to five-year-olds allows local programs to buy more equipment, study their needs, provide the least restrictive environment.

VT Legislation mandates special education for three- to five-year-old children by 1991.

VT New programs are funded for handicapped and at-risk children ages three to five years. There are new state programs for which Head Start programs are eligible to apply.

NY New guidelines and standards for reimbursement from state to counties which offers a mechanism for easier payment for services to handicapped children.

WV LEAs must now serve three-year-olds in addition to four- and five-year-olds who are severely handicapped.

NC Received so much money -- from $700,000 grant to $10 million -- this year for five-year-olds. Increased services to more than 3,000 five-year-olds this year.

MN New legislation mandates are services to birth and state money for Head Start. Head Start can apply directly for more children.

NM State mandated services to three- and four-year-olds through the LEAs in July, 1987. New Mexico now serves children who were served by Head Start.

MO Senate Bill 658 mandates the screening of those two years old and under, referrals to Head Start and training for parents. Three Head Start grantees are screening sites as selected by SEA.

MO Three neonatal clinics in Missouri have been planned under new federal legislation.

IA Preschool legislation for four-year-olds. Each LEA must have a four-year-old/preschool program which may threaten Head Start programs (although Head Start could serve three-year-olds). Teachers would have to be certified. Perhaps Head Start could be a setting.

OR RAP was much involved in legislation for environmentally "at risk" children to set up models for Head Start-like programs. It is in the early stages of serving about 300 children.

Practices, Policies, Programs

CT An added push on interagency work to serve the birth to three-year-old population this year.

PR Better coordination of services. Better communication between Head Start and SEA. SEA attends meetings that Head Starts have to discuss issues. Better understanding of Head Start.

VI The Virgin Islands has selected to participate in serving birth to three-year-olds under PL 99-457. The Interagency Council has been reactivated. Health is the lead agency for ages birth to two, and Education for three- to five-year-olds. Head Start and Vocational Rehabilitation are service providers.

PA A major focus by the new Commissioner of Education this year is on mainstreaming.

PA PL 99-457 was the catalyst for services for children from birth to five years of age. An interdepartmental committee has been formed for decision-making on and analysis of the new law. Agency responsibility was reevaluated. Welfare would now take responsibility for ages birth to two years. Education would be responsible for three- to five-year-olds. Children at risk of developmental delay will now be included in the state's count under PL 99-457.

SC Service providers are beginning to interact more and trying to improve services due to increased federal money.

MS Head Start in Mississippi serves such a high percentage of low-income children that they have never received new federal Head Start funds to increase enrollment. Consequently, Mississippi grantees were asked to cut back the number of children they were serving so they could get new monies to increase staff salaries.

MS There have been major concerns by individual grantees on how to interpret regional guidelines on serving five-year-olds. It is unclear whether all five-year-olds will be served (handicapped or non-handicapped) or that five-year-old handicapped children will be considered only on a case-by-case basis. Since public kindergartens are serving five-year-olds and the Mississippi Head Start enrollment has been reduced, Head Start staffs are being laid off.

Region IV Reorganization of RAP and the Specially Funded Network.

IL Eight to ten Head Starts are subcontractors to LEAs as recipients of grants to serve children at risk for developmental delays.

NM Among four models in the state of New Mexico is the mainstreamed model where the LEA places children in Head Start and provides ancillary services.

OK Communication increased between Head Start and school staff as a result of meetings and conference sponsored by RAP/SEA.

TX Texas has been implementing a pre-kindergarten program within the state.

NB The state's revision of diagnostic criteria for speech and language impaired left a big gap between the Head Start definition and the state's diagnosis. Thus, Head Start programs will have to buy services for more children.

MO Developed a concept paper and plan to serve three- to four-year-olds. More school districts are serving handicapped three- to four-year-olds and using tighter guidance.

CO Services to handicapped children through public schools have expanded 50%.

CO Training of providers to handicapped children including Head Start has increased. Interagency training has been strengthened.

CO The new governor's wife's initiative is at-risk/disadvantaged children from birth to five years of age, including handicapped.

ND A couple of programs were developed on reservations for three- to five-year-olds with handicapping conditions.

NV Subgrants from the state have been available on a competitive basis to programs including Head Start. Some funded are: a) Intertribal Council Head Start where money pays for therapists on reservations and supplements services, and b) Elko Head Start where money allows this Head Start which is on the Utah border to get training and related service with a self-contained program.

HI Private school has received $100,000 grant to expand services to Hawaiian and part-Hawaiian, at-risk, four- to five-year-old children.

WA The Early Childhood Education and Assistance Program (ECEAP) was expanded. The most successful applicants have been Head Start programs. In effect, ECEAP is a Head Start expansion program.

Interagency Collaboration

NJ New Jersey SEA, together with their Regional Early Childhood Coordinators, made a concerted effort to complete written collaborative agreements between Head Start grantees and LEAs. At present, 31 are documented by RAP. As a result of interagency agreements, LEAs do not need to wait until kindergarten to know the number of children coming. More handicapped children are in both LEAs and Head Starts.

AL All school systems are serving five-year-olds, and some public schools are serving younger children. Some are contracting with Head Start for placement. But, the new SEA agreement was so confusing that many public schools did not want to work with it. This year the SEA agreement was redone and next year it will be easier for public schools to use it.

KY Awareness of services offered by agencies increased thanks to the "Awareness" meetings RAP put on in the state capitals last year.

MN Head Start is increasingly involved on local interagency committees.

TX Agreement signed between Texas SEA and ACYF.

AK More effort was expended to work cooperatively at State and local levels.

Legislation Proposed But Not Passed

SC Reviewing legislation to provide services beginning at three years of age which may significantly affect Head Start.

NV Unsuccessful attempt to get legislative mandate for school districts to begin services to children at three years of age.

Committees and Councils

MN Head Start will be represented on the Early Childhood State Advisory Committee for Minnesota's state planning grant.

4. Actively Participate in RAP Task Forces

RAP staff participated in four task forces during 1986-87. The Migrant Task Force, the Indian Programs Work Group, and the Birth-to-Three Task Force continued from earlier years; the Technology Task Force was initiated this year. This task was ranked as being of moderate importance.

Task forces are created by ACYF and members are usually appointed. Past RAP task forces have resulted in the development of a variety of materials, policy recommendations, and innovative program strategies with benefits to handicapped children, the RAP network itself (e.g., computerized MIS, training packages), and Head Start program staff (e.g., funding guidance for PA 26, recommended changes in the diagnostic criteria).

The performance of any task force is directly linked to a clear definition of its goals, tasks, and target date. Members who bring relevant skills and interests to the group also strongly affect the outcome. In 1986-87, RAPs recommended greater opportunities for exchange of information among members. It was suggested that communication should be increased by setting aside more time for task force work at national RAP meetings, by making bimonthly contact by telephone, and by making better use of RAPs' telecommunications capabilities. They not only suggested that members receive reimbursement for costs incurred in developing and distributing materials, but also for task force members' travel and for time spent.

Task force participation is undertaken as an important role within the RAP network. Not only does it result in the creation of useful materials, capitalize on existing resources, and increase RAPs' visibility, but it also provides RAP personnel with a valuable opportunity for engaging in professionally challenging work.

A description of the task forces operating during the year follows with an emphasis on their accomplishments.

Birth-to-Three Task Force

Members: New England (Chair), NYU, Region VII, SWHD

Diagnostic criteria for preschoolers are not appropriate for disabled and at-risk infants and toddlers. Based on a study of Head Start programs serving infants and toddlers, the Birth-to-Three Task Force was asked to draft eligibility criteria for services to this population. One aim was to make diagnostic criteria available to ACYF's Parent Child Centers (PCCs) which serve a birth-to-three-year-old age group.

At the August, 1986 RAP meeting, the task force decided to collect information on currently available diagnostic criteria from a broad spectrum of providers. Each member of the task force canvassed some segment of national service groups, organizations, and state agencies in the fields of education, health, and medicine. At the October 1986 DEC meeting in Louisville, Kentucky, these data were organized in matrix form so that the task force could determine commonalities.

The task force's next step was to design a questionnaire to gather information systematically from the PCCs. It was particularly interested in finding out which handicapping conditions are seen by PCC staff and which diagnostic and assessment tools are used, as well as soliciting input from them on the appropriateness of eligibility criteria. The task force had the opportunity to meet with a consultant from the Child Development Unit at Children's Hospital at the RAP meeting in Phoenix.

The passage of PL 99-457 in September, 1986 shifted the objectives of the task force slightly. Rather than drafting criteria immediately, members began to follow the development of diagnostic criteria for the birth-to-three population in five states. The task force aimed to draft its own criteria by February, 1988.

Indian Programs Work Group

Members: Three Feathers (Chair), Mississippi, Great Lakes, Denver, SWHD, PSU

The Indian Programs Work Group met on three occasions, at each of the two national RAP meetings and at the national meeting of T/TA Directors in Washington, D.C., in March, 1987. This task force assisted the network by providing RAPs with updated information on the policy and practices of ACYF's American Indian Program Branch (AIPB). As a result, communication was maintained and RAP resources and training were widely shared with the Indian grantees. One project undertaken in 1986-87 related to needs assessments. Since Indian grantees are asked to complete many different needs assessment forms, the task force planned to develop a consolidated needs assessment whose results could be shared with all T/TA providers serving Indian grantees.

Technology Task Force

Members: Great Lakes (Chair), New England, University of Maryland, Chapel Hill, Texas Tech, SWHD, PSU

The Technology Task Force spawned three subgroups. One subgroup clarified the problems with the existing RAP computer equipment and explored and assessed the options available for replacing the current hardware. This culminated in final recommendations on new computer hardware announced at the August, 1987 RAP meeting. Recommendations for software were also made. The second subgroup researched technology currently in use for training by collecting information on videotapes, videodisks, interactive computers, and other computer-based training software and hardware. A third subgroup focused on the future use of telecommunications by the network.

An informational packet and a tutorial disk on telecommunications were developed by the task force and distributed to the RAPs. Several RAPs elected to subscribe to SPECIALNET, a computer-based communication network for professional educators.

Migrant Task Force

Members: Texas Tech (Chair), Mississippi, PSU

During its third year, the Migrant Task Force continued actively promoting information exchange between the RAPs and migrant Head Start grantees. A number of materials had been developed and disseminated in previous years. At the 1986-87 National Migrant Head Start Directors Conference, task force members made a presentation, conducted three training sessions, and staffed the RAP booth at the information fair. Having successfully met its objectives, the Migrant Task Force was officially terminated at the August, 1987 national RAP meeting.

5. Maintain the RAPPLE Management Information System

RAPs are required to document all work with their clients through uniform recordkeeping procedures. The software system used, named RAPPLE, was designed by RAPs for RAPs. RAPs ranked this task as being of minimal importance, primarily it seemed, because the delivery of service takes precedence over the documentation of it. In addition to uniform software, all RAPs originally purchased Apple IIE hardware. Each RAP expanded its capability by purchasing hard disk in 1985-86 to obtain greater storage and speedier access to data.

RAPPLE is intended to promote accountability within each RAP as well as to the government contracting agency. In-house it functions as a system for management and follow-up and a data base for program analysis. Ideally, RAPPLE permits RAPs to exchange information because they record, store, and access data in the same way. The government benefits from a uniform recordkeeping system because service delivery patterns across the country can be distinguished. (See the sub-section on RAP Task Records for a description of these data.)

The RAPPLE software program collects three types of information:

> Agency information consisting of basic data (name, address, contact person, needs, capabilities) of Head Start grantees, resource providers, and others (referred to as non-Head Start agencies);
>
> Resource information consisting of annotated entries for all types of written and audio visual materials; and
>
> Event information containing the records of services RAP has delivered. Events consist of activities (requests for service requiring little time to complete) and the RAP's response and task records (labor and time intensive transactions that pertain to specific RAP tasks).

In 1986-87, hardware at nine of eleven RAPs was not functioning well or broken. Numerous repairs were cited. That the system was outdated or new equipment was needed appeared frequently among solicited RAP comments about the computerized system. No suggestions assumed on-going use of existing equipment. Two RAPs, however, did mention an ongoing need for a uniform computerized system.

Many suggestions made by RAPs were directed toward the design of software. (Each of the following suggestions was mentioned once.) Essentially, RAPs want a program which would collect data in a way that would make data usable. RAPs found that they needed to be able to manipulate data for program justification, organizing conference registrations, and tracking contacts made at conferences. One RAP wants a system that sorts and retrieves activities by attribute, agency, or date; another requested a mechanism for maintaining task records in the new system. Most important to one RAP was that new software be fast as well as more efficient. Another listed "user-friendly" as a criterion. Purchasing existing commercial software was considered preferable to once again designing a RAP specific program for new hardware. Two RAPs found that SpecialNET, a computerized information network for special education, was a very positive addition.

RAP Use of the Profile

The Profile is a hard disk designed and manufactured by Apple. All RAPs were required to purchase a Profile in FY'86 and use it for all data entry. Original instructions directed RAPs to install their RAPPLE programs on the Profile and to re-enter all Head Start programs, providers, resources, activities, and task records.

Only three RAPs were able to use the Profile as directed (TTU, Denver, and SWHD RAPs). Breakdowns precluded its use at five RAPs (NYU, Chapel Hill, Mississippi, Region VII, and PSU RAPs). The remaining three had difficulty justifying further investment of time in what appeared to be a defunct system except to maintain activities and task records for evaluators' purposes.

Monthly Recording Procedures

Not only were RAP contractors expected to maintain records on the Profile, but they were also expected to keep them current. As instructed by ACYF, RAPs were to enter task records and activities on a monthly basis.

Although frustrated by hardware and software difficulties, most RAPs kept activities and task records updated monthly. Eight of eleven RAPs documented most of their activities according to contract specifications, whether on paper or on software (NYU, University of Maryland, Great Lakes, Texas Tech, Region VII, Denver, SWHD, and PSU RAPs); seven RAPs updated most of their task records as frequently (University of Maryland, Chapel Hill, Mississippi, Texas Tech, Region VII, Denver, and SWHD RAPs). Reasons given by RAPs who did not keep activities current were "hardware failure," "no longer required for evaluation purposes," and "not enough time;" other RAPs chose not to maintain monthly task records because of "hardware failure," "easier to write one very general task record [because of so many ongoing details]," and "low priority."

Evaluator Observations

RAPs were less rigorous in maintaining recordkeeping protocols. RAPs maintained activities and task records fairly regularly in 1986-87, but no longer consistently relied on RAPPLE and Apple to do so. Over the years RAPs saw the value in a uniform recordkeeping system and have used their contract and the evaluation to stay on task. With hardware at nine out of eleven RAPs now defunct, it is past time for ACYF to make decisions about how and if records are to be maintained in the future so that the discipline RAPs have developed over the years can be sustained.

Other RAP Tasks

6. Establish Contact with Directors

The scope of work directs RAPs to maintain contact with Head Start directors. Although RAPs have most contact with handicap coordinators and teachers, who are typically involved in the day-to-day implementation of the handicap component, ACYF recognized from the beginning that RAPs needed to establish and maintain rapport with Head Start directors. RAPs rated contact with directors as a major task.

Two events in recent years underscored the importance of this relationship. First, the Head Start T/TA system was changed. Grantees have been funded directly for T/TA services, so directors made more decisions about how their training dollars are spent. Directors also became more accountable for the success of the training "bought," its quality, and its relevance for the staff. Second, collaboration with local community agencies became more crucial with the passage of PL 99-457. More than ever, improvements in programs depended on a commitment from personnel at the top, especially the "follow-through" of directors.

RAPs depended on Head Start meetings at the state, regional, and national levels for maintaining contact with directors. All 11 RAPs attended many Head Start directors meetings and Head Start association meetings in 1986-87. Three RAPs also participated in training held for new directors. Collectively, RAP staff were present at 66 state, 24 regional, and 24 other meetings with directors. The average number each RAP attended was nine meetings.

RAPs offered some special services to directors this year. The NYU RAP brought directors and handicap coordinators together with the New Jersey SEA. NYU RAP also held sessions specifically for directors at three of its training conferences. The University of Maryland RAP made a special presentation on PL 99-457 at the request of Virginia directors. The SWHD RAP intervened in a deadlocked dispute at the request of its Regional Office by assisting the director, Parent Policy Council, and classroom staff to reach a solution by consensus.

RAPs routinely included directors on their mailing lists which kept directors informed about conferences, interagency agreements, RAPs' progress, and findings from needs assessments. Sections of the Chapel Hill RAP's newsletter were written specifically for directors. RAPs also maintained regular periodic phone contact with directors to discuss issues of mutual concern and to alert directors to upcoming training events, new program initiatives, and legislative changes. RAPs made a specific effort to invite directors to attend RAP training as well as to respond to their direct requests for materials and technical assistance. Most RAP advisory committees included directors as members.

RAPs saw their primary responsibility to directors as keeping them abreast of RAP activities and handicap issues so that they were informed decision makers. In turn, it was hoped that directors would offer even greater support to their programs' handicap efforts.

7. Establish and Conduct an Advisory Committee Meeting

Each RAP is required to establish its own advisory committee. RAPs ask members to advise them on general policies and procedures and to assist them in planning, assessing, and evaluating their services. The overall composition of the committee is left to the contractor. However, ACYF requires that the committees be composed of at least one ACYF Regional Office representative, a Head Start director, and a parent of a handicapped child in Head Start. It is suggested that membership also include a representative of a local educational agency, a state education agency, and a handicap coordinator.

The average size of a RAP advisory committee in 1986-87 was 16 members, the same as in 1985-86. Sizes ranged from 10 members at Texas Tech RAP to 26 members at Great Lakes RAP. Seven RAPs met the minimum requirements for membership (New England, NYU, Mississippi, Great Lakes, TTU, Region VII, and SWHD RAPs); four RAPs did not have a parent member (Region III, Chapel Hill, Denver, and PSU RAPs); one (SWHD) did not have Regional Office representation. Two RAPs (Mississippi and PSU RAPs) included all three "suggested" representatives. All 11 RAPs included a handicap coordinator. Three had LEA representation; (Mississippi, Region VII, and PSU RAPs) and all 11 had recruited at least one representative from states in its area. In all, 47 SEAs sat on RAP advisory committees. Nine RAPs included all of the SEAs in their service areas on their advisory committees. (New England, U. of Maryland, Chapel HIll, Mississippi, Great Lakes, Region VII, Denver, SWHD, and PSU RAPs). Six RAPs (U. of Maryland, Chapel HIll, Great Lakes, TTU, SWHD, and PSU RAPs) had a migrant representative and three had Indian representatives (Mississippi, SWHD,and PSU RAPs).

Each RAP determines how often its advisory committee will meet. Eight RAPs convened one meeting during the year; three (NYU, TTU, and SWHD RAPs) held two meetings each.

The comments of a selection of SEAs about the value of these committees to their own agencies are noteworthy (see the collaboration section of this report). RAPs ranked this task as being of moderate importance.

8. Assist Head Start Grantees with the Annual Survey of Handicapped Children in Head Start

RAPs are required to assist grantees with an annual Head Start Program Information Report (PIR), formerly known as the Annual Survey of Handicapped Children in Head Start. This task was rated by the RAPs as having minimal importance.

The data, which each Head Start is obligated to provide, are presented to Congress by ACYF in the Annual Report on The Status of Handicapped Children in Head Start Programs. The report documents the number and types of handicaps diagnosed among children in each Head Start program, types of services provided, and ongoing program needs related to the handicap effort. Overall, RAPs rated this task to be of minimal importance. The results of the survey have implications for the RAPs when the states they serve fail to meet the requirement that 10 percent of the Head Start enrollment be handicapped.

In 1986-87, all 11 RAPs responded to requests for clarification or technical assistance in completing the form. Several RAPs were embarrassed not only because they had not been sent advance copies of the PIR so as to be prepared for grantees' questions, but also because there were typographical errors in the survey form.

Chapel Hill and Texas Tech RAPs provided training or invited a Regional Office representative to present information on the form. Texas Tech RAP again disseminated the check list they had developed for filling out the PIR. Final data for handicapped children were compiled for each state and sent to grantees by University of Maryland, Chapel Hill, Great Lakes, and Texas Tech RAPs. With a small grant from their Regional Office, Great Lakes RAPs prepared to develop a micro-computer database to process regional PIR data. SWHD reviewed the PIR form at handicap coordinator meetings in order to anticipate questions.

RAPs in five regions were asked specifically by their Regional Offices to assist with the PIR (III, IV, V, VI and VIII). In addition to commenting on the draft version of the survey, University of Maryland RAP was listed as the regional contact for questions on the handicap section. Chapel Hill and Great Lakes RAPs' analyses of PIR data, mentioned earlier, were at the request of their Regional Office. It was in response to Region VI ACYF that Texas Tech RAP developed its check list and provided training on the completion of the PIR. And finally, Chapel Hill, Mississippi, and Denver RAPs were asked by ACYF Regional Offices to make themselves available to assist with grantees' questions.

9. Maintain an Updated File of Resource Providers

RAPs help the Head Start programs' extend their own capability through referrals to specialists and the distribution of materials. Each RAP is required to develop a file of resource providers and to update it annually. This task was ranked by RAPs as moderately important.

Six RAPs (New England, U. of Maryland, Chapel Hill, Mississippi, TTU, and PSU RAPs) completed revisions of their provider files; five (NYU, Great Lakes, Region VII, Denver, and SWHD RAPs) added new resources but had not deleted any. Tending provider files is seen as an ongoing process, with entries being added and deleted throughout the year.

Some RAPs revised their lists by phoning providers or sending them questionnaires to reconfirm their availability and to update contact information. Others relied on advisory committee members and local Head Start staff (e.g., Specially Funded Cluster Coordinators) to add the names and credentials of new local providers to RAPs' resource bank.

There were a total number of 5,298 service providers on file, a decrease by 21 percent from the previous year. Of these, RAPs reported using about eight percent or 408 providers, frequently. On average, each RAP used 37 resources regularly, ranging from 20 at SWHD to 70 at Great Lakes RAPs.

10. Conduct Needs Assessment

The Needs Assessment Process

The formal needs assessment process is carried out differently by each RAP. Since no single method or focus is dictated by ACYF, each RAP uses methods and timing best suited to its region and determines whether to limit the assessment (e.g., training needs alone) or to assess needs more broadly. Despite differences in the frequency and methods of gathering information from grantees, the aim is the same: to initiate and maintain ongoing contact with grantees and to identify what assistance the programs need. Information from grantee staff enables RAPs to tailor their service delivery to meet programs' most pressing handicap-related needs. As in previous years, the needs assessment process was rated as a major RAP task.

In general, no opportunity is lost to gather accurate information on programs' needs. Most RAPs rely primarily on a written form developed and distributed each year for gathering needs data from grantees. This core data is then supplemented throughout the year by telephone or in person (at meetings, trainings, or on-site visits by the RAPs).

In 1986-87, the NYU and PSU RAPs collected the bulk of their information by telephone, having first alerted grantees to the call in a letter. In an effort to "give as well as take," NYU RAP even sent several useful materials to the grantees along with this announcement notice. The Denver RAP collected its needs assessment data either by telephone or mail depending on the preference of individual grantees. Due to the amount of time this approach involved, the NYU RAP could not complete calls to all grantees.

In Region III, information on handicap training needs was drawn from the region's comprehensive "Training Needs Assessment" that covers all components. From these data, the University of Maryland RAP identified the top needs for each grantee, each state, and the region. The Chapel Hill and Mississippi RAPs were involved in the development of the needs assessment form in Region IV, as well as in the compilation of the data once they were collected; the RAPs relied on the regionwide network of Specially Funded Coordinators (SFCs) to actually collect the data from Head Start grantees. The Mississippi RAP sent an administrative needs assessment to handicap coordinators and a different form to teachers. Great Lakes RAP was involved in creating the first regional needs assessment for Region V.

Regular contact with grantees is a hallmark of RAP work. At one time, all RAPs were expected by contract to maintain quarterly contact, but no longer. However, most RAPs, do systematically maintain regular contact to update information as the Denver RAP did by contacting each of its grantees three or four times during the year. Texas Tech and SWHD RAPs did conduct telephone canvasses quarterly in addition to conducting an annual needs assessment. Region VII RAP conducted canvass calls in the fall and spring quarters plus all other quarters in which the grantee had not otherwise been seen or heard from. New England, Great Lakes, and PSU RAPs collected information by telephone twice a year. The University of Maryland RAP conducted one telephone canvass.

The Mississippi RAP, perhaps because it has a smaller area to cover, had the most frequent contact with its grantees. The Great Lakes, Texas Tech, Region VII, Denver, and PSU RAPs distributed written information to grantees on a monthly or quarterly basis in addition to their other contacts. Both the New England and PSU RAPs collected census data from grantees.

Though useful, a telephone canvass is a very time consuming task, especially for RAPs with large numbers of grantees. This year, both the New England and Great Lakes RAPs determined that a telephone canvass was not feasible and used the mail instead. Telephone calls were then used to clarify this information as needed.

Grantees' Training Needs

Based on the RAPs' needs assessment surveys, specific handicapping conditions emerged as the most common areas of need. Among these handicapping conditions, the most frequent request by far was for assistance in dealing with behavior disorders, especially behavior management techniques (six RAPs). In both Region I and Region VII, health impairments also were a frequent subject area. Other specific handicaps identified as priorities were Attention Deficit Disorder and emotional disturbance (Great Lakes), mental retardation (Region VII), learning disabilities (Denver), speech and language (SWHD), and dental handicaps (TTU). Mississippi programs wanted to learn specific teaching strategies for emotionally disturbed, learning disabled, and mentally retarded children.

PL 99-457, the Education of the Handicapped Amendments of 1986, was a training topic desired by grantees in Region IV, VI, VII, IX, and X. Parents were another popular focal point for training requests. Topics relating to parents included training parents on their rights (Mississippi), parent involvement (Great Lakes), parents as advocates (Great Lakes), single parenting (Texas Tech), and working with parents (Denver). Transition surfaced as a major topic in the areas served by Chapel Hill and Texas Tech RAPs. Chapel Hill, Texas Tech, and SWHD RAPs also had grantees requesting assistance on local interagency agreements/collaboration. Both the New England and NYU RAPs discovered that grantees needed information on, as well as assistance in, accessing payments from Medicaid.

Additional handicap-related topics which surfaced by means of RAPs' needs assessments included: gifted children, managing PA 26 funds, preschoolers with AIDS, proposed changes in handicap regulations, assessment and diagnosis of Southeast Asians, conflict between the Head Start director and Executive Director, licensing problems of non-ambulatory children, and new diagnostic criteria. Some topics which surfaced were not necessarily related to the handicap component, namely: making classroom materials, use of volunteers, stress management, orientation for new employees, preschool curricula, recordkeeping and budgeting, and depression and mourning.

Indian and Migrant Programs

Most RAPs serve either Indian or migrant Head Start grantees located within their regions, and some RAPs serve both. Although Three Feathers RAP is funded to serve many of the Native American grantees, the remaining Indian grantees and all of the migrant grantees have been incorporated into the service delivery plans of other RAPs in recent years. To the fullest extent possible, then, RAPs extended the full range of services offered to regional Head Start grantees to these programs. This included the assessment of handicap-related program needs for training, technical assistance, materials, and interagency collaboration support.

The inclusion of the Indian and migrant grantees in recent years increased the volume of RAPs' "routine" workload. They were included on RAP mailing lists, incorporated into telephone canvasses, and invited to training events. RAPs consulted and collaborated with both the Indian RAP and Interstate Research Associates (IRA), the resource center for migrant programs nationwide. Services were further coordinated through the efforts of the RAP Migrant Task Force and the Indian Program Work Group.

At least five RAPs held training conferences designed specifically to address the needs of Indian and migrant grantees in 1986-87. Great Lakes RAP designed a needs assessment only for the migrant grantees located in its service area. PSU RAP canvassed migrant programs using a different set of questions than those asked of regionally-funded grantees. The Chapel Hill RAP involved the large migrant grantee which oversees many programs along the eastern seaboard into the process of revising the North Carolina state agreement. PSU RAP secured a substantive interagency agreement with the Bureau of Indian Affairs (BIA).

Many of the services to Indian and migrant programs reflect their specific requirements. Migrant programs, for example, operate for as long as a harvest season lasts, and then relinquish their clients to the programs further up the migrant stream. Therefore, RAPs must pay attention to the timing of their services. Indian grantees are often located in isolated or hard-to-reach areas (e.g., at the base of the Grand Canyon) which requires additional planning. In either instance it is a RAP's intention to deliver services which are also culturally appropriate.

Fetal Alcohol Syndrome (FAS) was one topic frequently identified by Indian programs as a training topic. Insufficient PA26 funds, insufficient numbers of qualified personnel, and unclear dental policies were also identified as problems that needed to be addressed through training. Difficulties completing a full service delivery cycle for children and the inefficiency of tracking systems as children move with their families and the season were two problems encountered by Head Start migrant programs. Mountain and rural programs, generally, attributed a lack of services to a lack of transportation.

Many of the obstacles which plagued rural Head Start programs, including many Indian and migrant programs, defied easy answers. SWHD RAP, however, worked extensively in Region IX to alleviate a variety of chronic problems. For example, at a two-day preservice workshop for a migrant grantee, RAP arranged not only for separate sessions to be held in English and Spanish, but also for the college credit to be available upon completion. SWHD RAP also encouraged grantees with limited resources to pool their resources to buy services and worked with regional Head Start programs to establish "sister programs." RAP worked with Indian directors to prepare PA26 grant packages. Because "Baby Bottle" tooth decay is a high incidence problem among Native American children, SWHD RAP staff involved themselves in a major conference on the subject. In California, SWHD RAP also intervened with the SEA to ensure that LEAs were providing all of the state services to Indian programs that were required by law.

11. Attend National RAP Meetings

Biannual RAP meetings continued to fill an important function by bringing together all RAP staff for information updates, training, and revitalization. This year's national RAP meetings were held in Virginia Beach, Virginia, from August 11-15, 1986, and Phoenix, Arizona from February 23-27, 1987. RAP personnel have come to depend on these formal and informal opportunities for information exchange and exposure to new resources. RAPs ranked this task as being of major importance.

The RAP meetings serve a variety of purposes. Among the most keenly anticipated are the updates on policies, initiatives, and other national concerns provided by National Office staff. Significant information is often heard first at RAP meetings where details can be clarified immediately. This enables RAP staff to anticipate future trends and plan for them. Invited speakers bring new information and resources related to work with handicapped children to the attention of the network. Above all, national meetings provide a regular forum for the RAPs to share information among themselves. Different approaches are compared for accomplishing similar tasks, RAP-developed materials are distributed, and problems can be solved. Meeting agendas allow discussions to range across many issues, problems, and concerns. New staff benefit from this orientation to the larger context of their work. In the course of the week, they obtain a clearer understanding of the RAP mandate and responsibilities through face-to-face participation with the entire group. New staff are especially appreciative for the opportunity to learn concrete ideas for performing their day-to-day jobs.

The timing and location of the Virginia Beach meeting enabled RAP staff to visit a migrant Head Start program. At that same meeting, RAP staff also learned about a new ACYF day care manual, a computerized library system, and a training videotape which focused on a Head Start child born without arms and legs, entitled "Alyssa." Dr. Gordon Williamson, Director of the Pediatric Rehabilitation Department, Kennedy Medical Center, in Edison, N.J., made a presentation on enriching the sensory-motor curriculum, providing information on its rationale as well as many activities for classroom use.

Highlights of the Phoenix RAP meeting included a presentation entitled "Learning How to Learn" about mediated teaching in Head Start. The new Head Start Mental Health Project was introduced as was an ACYF discretionary project aimed at increasing participation of children with handicaps through modified games. In addition, RAP task forces were able to hold meetings, and task force reports were made to the whole group late in the week.

The RAP meetings have changed over the years in response to specific suggestions. Those features considered particularly valuable have been retained, namely the opportunity to share RAP products, get ideas from colleagues, learn how colleagues deal with RAP tasks, and receive training. The three main recommendations after this year's meeting urged (1) an increase in the time scheduled for formal discussions to capitalize on the expertise within the network; (2) a greater focus on RAP-specific topics (e.g., needs assessment process); and (3) more training.

Several RAPs suggested shortening the length of the meetings. Related suggestions included holding only one week-long meeting per year, or only one short meeting in the summer solely for RAP directors. The latter might be followed by a longer meeting for all staff in the winter and would include training. Another suggestion was to schedule the training segment before or after the meeting so that it could be optional for those whose RAP responsibilities were solely administrative. One benefit of a shorter meeting was that it would allow staff a full day in the office immediately following the RAP meeting. Counterbalancing all these suggestions was one strong recommendation to keep the whole group together rather than dividing it up in any way.

Some additional recommendations about the use of time at the meetings included developing uniform, networkwide approaches, establishing policy, addressing critical issues, and discussing long-term directions. It was further suggested that a committee of RAP staff plan future agendas, that each meeting include a presentation by one expert, and that advance agendas include brief descriptions of all presentations. The introduction of internationally significant issues was another recommendation.

For experienced and new staff alike, the RAP meetings unfailingly generate new ideas, spark enthusiasm for trying new approaches, and renew individuals' sense of purpose. Professional growth stems from the active sharing of ideas and expertise. The net effects of the RAP meetings include the strengthening of the RAP network identity as much as that of each individual RAP program.

V

MATERIALS RAPS PLAN TO DEVELOP IN THE UPCOMING YEAR

ACYF has collected a wealth of materials specific to the needs of Head Start grantees who are mainstreaming children with handicapping conditions. Many of these materials have been developed by RAPs over the years in response to requests from teachers and coordinators. In the coming year, plans are underway for development and production of the following materials.

- Paper reviewing the literature on social/emotional development.
  Phase II on pediatric AIDS. (New England RAP)

- A guide to the IEP process for parents.
  Copies of the WCBS television special with "Alyssa". (NYU RAP)

- An update of report on the status of state progress on PL 99-457.
  Training modules on behavior management and on changing attitudes toward the handicapped. Videotape or slide tape for use in training. (University of Maryland RAP)

- Slide tape on the generic information which introduces each mainstreaming manual.
  Update of media previously developed by Chapel Hill.
  A package on nationwide interagency agreements and the implications for Head Start for collaboration at the state and local levels. (Chapel Hill RAP)

- Models for program options as training modules.
  Identification and recruitment strategies for local handicapped coordinators. (Mississippi RAP)

- Intensive training on cross-component integration/team building.
  Update or revision of "Handicap Coordinator Services Guide" for Region V coordinators.
  Guide on transition.
  Mental health booklet.
  Handicap Coordinators Directory.
  Video tapes on IEPs, screening, assessment, and diagnosis. (Great Lakes RAP)

- Reprinting of the Skill Building Block series.
  Booklet on behavior management.
  Booklet on transportation and the handicapped. (Texas Tech RAP)

- Video tape on handling and positioning motorically-involved children.
  Video tape on emotional disturbance.
  Update/rewrite Parents' Rights pamphlet.
  Handbook on Head Start handicap services reflecting 99-457 regulations. (Region VII RAP)

- Resource packets on specific topics. (Denver RAP)

- Parent materials in southeast Asian languages. (SWHD RAP)

- "RAP Sources" (PSU RAP)

VI
FINDINGS AND RECOMMENDATIONS

Findings

Budget and Staffing

- For the first year in the 11-year history of the RAP network, the program received a budget cut amounting to 25 percent below the actual funded level of the previous year and reverting to the FY'83 level.

- RAP budget totaled $2,320,615. Individual RAP budgets ranged from $152,598 to $249,577.

- RAP projects were consolidated in Region IV, V, IX and X. Services were reduced in Alaska and the Pacific Islands and among Indian grantees.

- Cuts were most apparent in travel, computer, and "other" cost categories. All but one RAP had lower budgets.

- For the network, travel fell by 47 percent. The computer line item dropped by 57 percent. "Other" costs declined by 35 percent. Salaries rose slightly, as did overhead and fringe.

- Salaries represented 48 percent of the budget; overhead was 15 percent; "other" costs were 15 percent; travel was 11 percent; fringe was 10 percent; and computer costs amounted to 1 percent of the total budget.

- Average budget for a RAP was:

Salaries	$ 102,077
Fringe	20,624
Overhead	32,315
Travel	23,412
Computer	2,022
Other	30,515
TOTAL	$ 210,965

- The salary line supported larger staffs at lower salary average. Average FTE staff was 4.1 compared to 3.6 last year. Average FTE salary of $24,624 was below previous year's level of $26,225.

SEA

- The pattern of interaction between RAPs and SEAs showed success: exchanges between RAP and SEA occurred almost on a monthly basis; SEAs described a variety of contacts averaging about 4 types. They expressed a high degree of satisfaction: 3.5 on a four-point scale.

- There were indications that progress had slowed: seven of eleven RAPs had less frequent contact with the SEA than last year. Six RAPs had lower satisfaction scores than last year. There were 16 percent fewer types of contact cited than in the previous year. More problems were cited (7 vs. 4). More suggestions for improvement were cited: 65 percent of the SEAs offered suggestions vs. 30 percent last year. Using a four-point index to express the frequency of contact between SEAs and RAPs, RAPs scored 2.9 compared to 3.0 last year.

- All SEAs had some contact with RAP. Sixty-five percent of SEAs reported contact with RAP monthly or more often.

- On the average, SEAs cited 4.2 types of contact with RAP compared to 5.5 last year. Types of contact most frequently cited by SEAs were:

Type	Percent SEAs
Dissemination of information	96
Meetings and workshops	56
Advisory committees	48
Other	46
Materials	44
Mutual projects	38
RAP as provider	33

- The types of contacts that showed the largest downward shifts were those that were more time-consuming and involved more personal contact:

Type	Percent of SEAs Citing
Advisory committee	16
Meetings and workshops	12
SEA collaboration	15
Mutual projects	11

The decrease in the meeting/workshop category was primarily at events sponsored by SEAs, not as events sponsored by RAPs.

- While the same percentage of SEAs as last year identified dissemination of information as a type of contact, fewer cited contact via telephone (69% vs. 73%), mail (63% vs. 71%), and in person (29% vs. 62%).

- Thirty-four SEAs (vs. 16 last year) offered suggestions to improve RAP's work. At least 14 related to the need for more contact or the remediation of a problem.

- Seven SEAs, or 13 percent, cited problems (vs. 4 last year).

- Satisfaction, rated 3.5 on a four-point scale, has been the same for three years.

- Two new SEA agreements have been signed in Vermont and Texas. The total number of agreements is 48.

Head Start Telephone Survey

- The average satisfaction score for the network in 1986-87 was 3.4, with individual scores ranging from 3.2 to 3.7. This overall score is a slight drop from last year (3.6) and a return to the satisfaction scores of 1982 and 1983.
- Scores decreased at six RAPs, remained the same at two, and increased at three.
- The average number of types of contact in 1986-87 was 4.3 types, exactly the same as the previous year. It ranged from 5.5 to 3.0. Compared to last year, average numbers of types of contact at six RAPs went down and increased at five. The most frequent type of contact was training. (Training was also the most valued service).
- Eight percent, or 19 respondents, said they had encountered a problem with RAP services compared to 6 percent in the previous year. Problems increased at five, remained constant at two, and decreased at four RAPs.
- On the average, RAPs maintained contact with grantees slightly more often than every other month. The frequency index dropped from 2.9 in the previous year to 2.5. Contact decreased at eight RAPs and increased at three RAPs.

Training Events

- RAPs trained 26,613 participants at 421 conferences. The vast majority of trainees were Head Start staff (87%). Forty-seven percent were Head Start teaching staff (12,601), and 38 percent were other Head Start staff (10,230). Ninety-four percent of all grantees attended RAP training. Seven of the eleven RAPs reached more grantees this year.
- The average number of people trained per RAP rose from 1,827 to 2,419 since the previous year despite the constraints imposed by budget reductions. Six RAPs increased the numbers trained.
- One in four trainings was a "co-sponsored" event, accounting for the rise in non-Head Start participants.
- There was a 21 percent decrease in the numbers trained in those regions previously covered by the four defunded RAPs.
- Based on the results of the evaluation sample, there was little overall change in the composition of staff in attendance at RAP training. The number of teaching staff fell by 8 percent. The number of handicap coordinator and social service staff rose this year by 4 percent and 2 percent, respectively.
- Seventy-nine percent of the trainees worked directly or indirectly with handicapped children. Of these, 45 percent worked directly and 31 percent worked indirectly. Seventeen percent had no contact all. Since the previous year, the number of trainees having some contact with handicapped children increased by 1 percentage point overall.

- The number of trainees previously attending RAP training events rose this year, from 58 percent to 62 percent.

- The overall satisfaction score for the network was 3.60, topping the score of every previous year. Individual RAP scores ranged from 3.34 to 3.82. Seven of the eleven RAPs bettered their "scores" from the previous year.

- In all, 96 percent of respondents rated RAP training as either "excellent" or "good." Overall, no training was rated "poor." Only 3 percent rated any training as "fair."

- On average, trainees identified 5.56 topics at training, a slight drop since last year (.34). Workshops on "mainstreaming" and "working with families" were the most commonly cited topics, mentioned by 52 percent of all participants. Workshops on "behavior management" (48%), "planning for each child" (46%), and "attitudes towards handicapped children" (41%) followed in frequency. Compared with the previous year, more attention was given to "behavior management" and "intercomponent coordination" and less to "child abuse and neglect", the "development of IEPs," and "attitudes toward the handicapped." The greatest change was the increased frequency of "behavior management" as a workshop topic (from 43% to 48%).

- Approximately one-fifth of all respondents attended a workshop on a specific handicapping condition. Three handicapping conditions were most common: learning disability, emotional disturbance, and orthopedic/physical impairment.

- The average number of changes anticipated by respondents rose from 3.0 to 3.25. The most commonly expected "change" was to "observe more closely," cited by 58 percent of the trainees. The next most common responses were "use new resources and materials" (50%); "use new ways to work with handicapped children" (43%); "work more closely with other staff" (39%); "work more closely with families" (35%); "use outside resources" (30%); and "develop IEPs" (16%). Eight percent of the respondents did not expect to make any changes in their work practices.

- Seventy-five percent of trainees reported "no problem" regarding equipment, facility, room temperature, etc. Even fewer trainees reported problems more directly related to the content of the training. Eighty-seven percent reported "no problems" at all. The 9 percent who had some problem with the nature of the training reported that "training was not what I expected," was "too general", or that the content as "too simple."

- Eighty-eight percent of the trainees made suggestions for training topics for the next program year. Overall, results resemble those obtained in past years. Future sessions were requested on behavior management (40%), working with families of the handicapped (31%), working with public schools (29%), supervisor's training (29%), and child abuse and neglect (29%). Trainees also expressed interest in IEPs, severely handicapped children, and specific handicapping conditions. Suggestions for workshops on specific handicapping conditions were made by 8 percent of the trainees.

RAP Task Records

- The number of task records coded was 936, a decrease of 24 percent from the previous year.
- On the average, A RAP recorded 84 task records in the nine-month period, an increase of 8 percent from the previous year.
- The most commonly recorded task records were training (41%), followed by other meetings (15%) and collaboration (10%).
- Uniform coding and recording protocols, though still in place, were not consistently followed.

Needs Assessment

- Most RAPs designed a written form to gather needs assessment data and then supplemented this information through the year.
- Most RAPs maintained contact with all grantees in some systematic way, although only two RAPs conducted quarterly canvasses.
- Needs assessments found that behavior management was the most requested training topic.

National RAP Meetings

- Two national RAP meetings were convened this year. The first was held in Virginia Beach, Virginia, in August, 1986; the second was held in Phoenix, Arizona, in February, 1987.

Head Start Directors' Meetings

- RAP staff attended 66 state, 24 regional, plus 14 "other" meetings with Head Start directors.

RAP Task Forces

- Four task forces were operational: Migrant Task Force, Indian Programs Work Group, Birth-to-Three Task Force, and Technology Task Force.

Recommendations

- ACYF must review the budget of the network to balance the effects of the Gramm-Rudman cutbacks upon individual RAPs.
- RAP staffs should review the findings of the SEA and Head Start telephone surveys to determine whether to increase personal contact by telephone, meetings, and through mutual projects to maintain the frequency and variety of types of contacts of the previous year.

- At a time when federal legislation has heightened the need for collaboration among federal agencies serving young children with handicaps, RAPs should respond to the suggestions posed by the SEAs in their service areas -- especially those calling for collaborative agreements and increased contact with Head Start or RAP.

- At national RAP meetings, more discussion time should be allowed after presentations to air controversy over issues, exchange professional ideas, and develop strategies for the network. Moreover, the majority of time should be devoted to issues specifically related to RAP tasks.

- The RAP network should have a long-term plan containing at least one major undertaking with a uniform network-wide approach to it, such as the development of training.

- There is a need among RAPs for guidance on issues of national importance that affect the members of the network. These issues include the expectations for their performance vis-a-vis the Resource Centers and with the new agreements with Public Health and Department of Education.

- RAP staff must be advised of the need to keep records uniformly and retrained in recordkeeping procedures. The system used for recording RAP tasks and activities has been carefully developed, but RAPs are not applying the system consistently. Task records were recorded more than once. Activities were recorded as both activities and task records. Ongoing events were recorded separately. Collaborative activities were particularly prone to being incorrectly classified by type. The "type" of task record often did not correlate to the narrative description.

- During 1986-1987 program year, six of eleven RAPs had the minimum composition required by contract for advisory committees. Parent membership was particularly lacking. If ACYF wants to maintain the required membership, it must convey this intention to the network. If the composition of the advisory committee is optional, then the contract should reflect that intent.

- Each task force needs a clearly stated purpose. We recommend that directors for task forces be specified in writing.

- ACYF is encouraging the RAPs to co-sponsor training sessions with other agencies that serve children with handicaps. ACYF should define "co-sponsorship."

- RAPs are a resource to Head Start programs having questions about the handicap section of the PIR. ACYF must provide them with an advance copy of the document as well as explanations about new questions.

APPENDIX A

THE RAP PROFILES

THE NEW ENGLAND RAP

BACKGROUND

Location: 55 Chapel Street
Newton, Massachusetts 02160
Telephone: (617) 969-7100
Funding Sponsor: Education Development Center (EDC)
Staff: Joanne Brady, Director
Meta Nisbet, Coordinator
Eleanor G. Lewis, Training Specialist

Funding Level: $202,000, national average: $210,965; rank: 7.

FTE Salary: $28,994, national average: $24,624; rank: 3.

Full-Time Equivalent Staff: 3.2, national average: 4.1; rank: 11.

REGIONAL SITUATION

States Served: Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, Vermont -- 67,000 square miles, national average: 326,300 square miles; third smallest geographic area.

Number of Grantees: 80; national average: 114; rank: 8.

FTE per Head Start: 25; national average: 27; rank: 6.

Estimated Number of Head Start Handicapped Children: 3,085; national average: 5,530; rank: 8.

FTE per Handicapped Child: 964; national average: 1,334; rank: 6.

Estimated Number of Head Start Teaching Staff: 1,768; national average: 3,752; rank: 8.

RAP OPERATIONS

Tasks identified as having major importance:
Conduct an assessment of grantee needs
Provide services and materials to Head Start programs
Provide training to Head Start programs
Facilitate collaborative agreements

Tasks identified as having minimal importance:
Maintain RAPPLE
Assist Head Start grantees with Annual Survey

RAP Training Conferences:

22 trainings were held, national average 38. 1,740 Head Start staff were trained, and 88 others were in attendance. 1,828 total trainees, national average 2,420; rank: 7. 96 percent of all grantees attended training, compared to 94 percent nationally.

Short Term Conference Evaluation:

Respondent Composition:

97 percent Head Start staff, 98 percent nationally
  62 percent teaching staff, 55 percent nationally
  35 percent others, 43 percent nationally
1 percent non-Head Start staff, 2 percent nationally

Respondent Satisfaction:

Satisfaction 3.51 on a four-point scale, 3.60 nationally
  50 percent excellent, 63 percent nationally
  45 percent good, 33 percent nationally
  1 percent fair, 3 percent nationally
  0 percent poor, 0 percent nationally

Respondents would adopt an average of 2.79 new practices as a consequence of training, compared to 3.25 nationally.

Resource Providers:

464 providers catalogued in RAP file, national average: 482.
25 providers used actively, national average: 37.

Advisory Committee:

1 meeting was held.

Task Force Membership:

Birth-to-Three Task Force (Chair)
Technology Task Force

Head Start Directors Meetings:

5 meetings were attended, plus 2 regional meetings.

Management Information System:

59 task records were recorded from August 1, 1986, through April 30, 1987, national average: 84.

Head Start Telephone Survey Results:

Satisfaction: 3.5 on a four-point scale, national average: 3.4. Average number of types of contact with RAP: 4.8, national average: 4.3. Problems cited by 14 percent of respondents, 8 percent nationally. 57 percent of the respondents identify training as the most valuable service RAP offers.

SEA Telephone Survey Results:

Satisfaction: 3.6 on a four-point scale, national average: 3.5. Average number of types of contact with RAP: 4.2, national average: 4.2. Frequency of contact: 2.8 on a four-point scale, national average: 2.9.

THE NEW YORK UNIVERSITY RAP

BACKGROUND

Location: School of Continuing Education
48 Cooper Square
New York, New York 10003
Telephone: (212) 477-9120
Funding Sponsor: New York University
Dinah Heller, Director
Liz Kuhlman, Coordinator
Barbara Schwartz, Resource Specialist
Ilona Harris, Assistant Coordinator

Funding Level: $231,000, national average: $210,965; rank: 5.

FTE Salary: $29,185, national average: $24,624; rank: 2.

Full-Time Equivalent Staff: 3.8, national average: 4.1; rank: 4.

REGIONAL SITUATION

States and Territories Served: 61,00 square miles, national average: 326,300 square miles; second smallest geographic area.

Number of Grantees: 80; national average: 114; rank: 6.

FTE per Head Start: 26; national average: 27; rank: 5.

Estimated Number of Head Start Handicapped Children: 7,722; national average: 5,530; rank: 3.

FTE per Handicapped Child: 2,032; national average: 1,334; rank: 2.

Estimated Number of Head Start Teaching Staff: 4,641; national average: 3,752; rank: 5.

RAP OPERATIONS

Tasks identified as having major importance:
Conduct an assessment of grantee needs
Provide services and materials to Head Start programs
Provide training to Head Start programs
Facilitate collabortive agreements
Establish contact with Head Start directors

Task identified as having minimal importance:
Maintain RAPPLE
Assist Head Start grantees with Annual Survey

RAP Training Conferences:

27 trainings were held, national average 38. 2,366 Head Start staff were trained, and 14 others were in attendance. 2,380 total trainees, national average: 2,420; rank: 5. 99 percent of all grantees attended training, compared to 94 percent nationally.

Short-Term Conference Evaluation:

Respondent composition:

- 97 percent Head Start staff: 98 percent nationally
  - 42 percent teaching staff, 55 percent nationally
  - 55 percent others, 43 percent nationally
- 3 percent non-Head Start staff, 2 percent nationally

Respondent Satisfaction:

Satisfaction 3.34 on a four-point scale, 3.60 nationally
- 42 percent excellent, 63 percent nationally
- 47 percent good, 33 percent nationally
- 9 percent fair, 3 percent nationally
- 0 percent poor, 0 percent nationally

Respondents would adopt an average of 3.45 new practices as a consequence of training, compared to 3.25 nationally.

Resource Providers:

470 providers catalogued in RAP file, national average: 482.
30 providers used actively, national average: 37.

Advisory Committee:

2 meetings were held.

Task Force Membership:

Birth-to-Three Task Force

Head Start Directors Meetings:

3 meetings were attended, plus 2 regional meetings.

Management Information System:

72 task records were recorded from August 1, 1986, through April 30, 1987, national average: 84.

Head Start Telephone Survey Results:

Satisfaction: 3.7 on a four-point scale, national average: 3.4. Average number of types of contact with RAP: 5.1, national average: 4.3. Problems cited by 0 percent of respondents, 8 percent nationally. 68 percent of respondents identify training as the most valuable service RAP offers.

SEA Telephone Survey Results:

Satisfaction: 3.9 on a four-point scale, national average: 3.5. Average number of types of contact with RAP: 3.8, national average: 4.2. Frequency of contact: 2.8 on a four-point scale, national average: 2.9.

THE UNIVERSITY OF MARYLAND RAP

BACKGROUND

Location: Head Start Resource and Training Center
4321 Hartwick Road, L-220
College Park, Maryland 20740
Telephone: (301) 454-5786
Funding Sponsor: University of Maryland, University College
Staff: JoAn Herren, Director
Sharon Adams-Taylor, Coordinator
Ann-Mari Gemmill, Training Specialist
Nancy Mallory, I&R Training Specialist

Funding Level: $188,512, national average: $210,965; rank: 8.

FTE Salary: $23,288, national average: $24,624; rank: 7.

Full-Time Equivalent Staff: 3.5, national average: 4.1; rank: 6.

REGIONAL SITUATION

States Served: Delaware, Maryland, Pennsylvania, Virginia, Washington, D.C., West Virginia -- 123,000 square miles; national average: 326,300 square miles; fourth smallest geographic area.

Number of Grantees: 139; national average: 114; rank: 4.

FTE per Head Start: 40; national average: 27; rank: 3.

Estimated Number of Head Start Handicapped Children: 6,098; national average: 5,530; rank: 5.

FTE per Handicapped Child: 1,742; national average: 1,334; rank 5.

Estimated Number of Head Start Teaching Staff: 3,497; national average: 3,752; rank: 6.

RAP OPERATIONS

Tasks identified as having major importance:
Conduct an assessment of grantee needs
Provide services and materials to Head Start programs
Provide training to Head Start programs
Establish and conduct advisory committee meeting
Facilitate collaborative agreements
Participate in national RAP meetings

Tasks identified as having minimal importance:
Maintain an updated file of resource providers
Maintain RAPPLE
Assist Head Start grantees with Annual Survey

RAP Training Conferences:

23 trainings were held, national average 38. 684 Head Start staff were trained, and 95 others were in attendance. 779 total trainees, national average 2,420; rank: 10. 94 percent of all grantees attended training, compared to 94 percent nationally.

Short-Term Conference Evaluation:

Respondent Composition:

99 percent Head Start staff, 98 percent nationally
    28 percent teaching staff, 55 percent nationally
    71 percent others, 43 percent nationally
1 percent non-Head Start staff, 2 percent nationally

Respondent Satisfaction:

Satisfaction 3.78 on a four-point scale, 3.60 nationally
    77 percent excellent, 63 percent nationally
    22 percent good, 33 percent nationally
    0 percent fair, 3 percent nationally
    0 percent poor, 0 percent nationally

Respondents would adopt an average of 2.86 new practices as a consequence of training, compared to 3.25 nationally.

Resource Providers:

180 providers catalogued in RAP file, national average: 482
51 providers used actively, national average: 37

Advisory Committee:

2 meetings were held.

Task Force Membership:

Birth-to-Three Task Force
Technology Task Force

Head Start Directors Meetings:

2 meetings were attended.

Management Information System:

58 task records were recorded from August 1, 1986, through April 30, 1987, national average: 84.

Head Start Telephone Survey Results:

Satisfaction: 3.3 on a four-point scale, national average: 3.4. Average number of types of contact with RAP: 3.2, national average: 4.3. Problems cited by 0 percent of respondents, 8 percent nationally. 70 percent of the respondents identify training as the most valuable service RAP offers.

SEA Telephone Survey Results:

Satisfaction: 3.5 on a four-point scale, national average: 3.5. Average number of types of contact with RAP: 3.2, national average: 4.2. Frequency of contact: 3.0 on a four-point scale, national average: 2.9.

THE CHAPEL HILL RAP

BACKGROUND

Location: Chapel Hill Training-Outreach Project
Lincoln Center, Merritt Mill Road
Chapel Hill, North Carolina 27514
Telephone: (919) 967-8295
Funding Sponsor: Carrboro School District
Staff: Anne Sanford, Director
Brenda Bowen, Coordinator
Shelly Heekin, Coordinator
Pamela Brockington, MIS Resource Specialist

Funding Level: $249,000, national average: $210,965; rank: 2.

FTE Salary: $22,591, national average: $24,624; rank: 8.

Full-Time Equivalent Staff: 4.9, national average: 4.1; rank: 3.

REGIONAL SITUATION

States Served: Florida, Georgia, North Carolina, South Carolina, Alabama, Kentucky, Tennessee -- 323,000 square miles, national average: 326,300 square miles; fifth largest geographic area.

Number of Grantees: 222; national average: 114; rank: 1.

FTE per Head Start: 45; national average: 27; rank: 1.

Estimated Number of Head Start Handicapped Children: 9,572; national average: 5,530; rank: 2.

FTE per Handicapped Child: 1,953; national average: 1,334; rank: 3.

Estimated Number of Head Start Teaching Staff: 6,968; national average: 3,752; rank: 1.

RAP OPERATIONS

Tasks identified as having major importance:
Conduct an assessment of grantee needs
Maintain an updated file of resource providers
Provide services and materials to Head Start programs
Provide training to Head Start programs
Facilitate collaborative agreements
Establish contact with Head Start directors

Tasks identified as having minimal importance:

Assist Head Start grantees with Annual Survey

RAP Training Conferences:

46 trainings were held, national average 38. 3,552 Head Start staff were trained, and 427 others were in attendance. 3,979 total trainees, national average 2,420; rank: 3. 94 percent of all grantees attended training, compared to 94 percent nationally.

Short-Term Conference Evaluation:

Respondent Composition:

- 99 percent Head Start staff, 98 percent nationally
  - 42 percent teaching staff, 55 percent nationally
  - 57 percent others, 43 percent nationally
- 1 percent non-Head Start staff, 2 percent nationally

Respondent Satisfaction:

Satisfaction 3.72 on a four-point scale, 3.60 nationally
- 74 percent excellent, 63 percent nationally
- 24 percent good, 33 percent nationally
- 2 percent fair, 3 percent nationally
- 0 percent poor, 0 percent nationally

Respondents would adopt an average of 3.45 new practices as a consequence of training, compared to 3.25 nationally.

Resource Providers:

1,300 providers catalogued in RAP file, national average: 482
50 providers used actively, national average: 37

Advisory Committee:

1 meeting was held.

Task Force Membership:

Migrant Task Force
Technology Task Force

Head Start Directors Meetings:

10 meetings were attended, plus 2 regional meetings.

Management Information System:

96 task records were recorded from August 1, 1986, through April 30, 1987, national average: 84.

Head Start Telephone Survey Results:

Satisfaction: 3.2 on a four-point scale, national average: 3.4. Average number of types of contact with RAP: 3.0, national average 4.3. Problems cited by 0 percent of respondents, 8 percent nationally. 68 percent of the respondents identify training as the most valuable service RAP offers.

SEA Telephone Survey Results:

Satisfaction: 3.8 on a four-point scale, national average: 3.5. Average number of types of contact with RAP: 4.1, national average: 4.2. Frequency of contact: 2.9 on a four-point scale, national average: 2.9.

THE MISSISSIPPI RAP

BACKGROUND

Location:	Friends of Children of Mississippi, Inc. 119 Mayes Street Jackson, Mississippi 39213
Telephone:	(601) 362-1541
Funding Sponsor:	Chapel Hill Outreach Project subcontracted to the Friends of Children Head Start
Staff:	Anne Sanford, Director Valerie Campbell, Project Coordinator Nita Norphlet-Thompson, Assistant Coordinator

Funding Level: $166,500, national average: $210,965; rank: 10.

FTE Salary: $20,059, national average: $24,624; rank: 11.

Full-Time Equivalent Staff: 3.8, national average: 4.1; rank: 4.

REGIONAL SITUATION

State Served: Mississippi -- 48,000 square miles, national average: 326,300 square miles; smallest geographic area.

Number of Grantees 23; national average: 114; rank: 11.

FTE per Head Start: 6; national average: 27; rank: 11.

Estimated Number of Head Start Handicapped Children: 3,044; national average: 5,530; rank: 9.

FTE per Handicapped Child: 801; national average: 1,334; rank: 9.

Estimated Number of Head Start Teaching Staff: 2,796; national average: 3,752; rank: 7.

RAP OPERATIONS

Tasks identified as having major importance:
Conduct an assessment of grantee needs
Provide services and materials to Head Start programs
Provide training to Head Start programs
Facilitate collaborative agreements
Establish contact with Head Start directors
Participate in RAP task forces

Task identified as having minimal importance:
Assist Head Start grantees with Annual Survey

RAP Training Conferences:

24 trainings were held, national average 38. 1,697 Head Start staff were trained, and 364 others were in attendance. 2,061 total trainees, national average 2,420; rank: 6. 100 percent of the grantees attended training, compared to 94 percent nationally.

Short-Term Conference Evaluation:

Respondent Composition:

98 percent Head Start staff, 98 percent nationally
    90 percent teaching staff, 55 percent nationally
    8 percent others, 43 percent nationally
0 percent non-Head Start staff, 2 percent nationally

Respondent Satisfaction:

Satisfaction 3.71 on a four-point scale, 3.60 nationally
    71 percent excellent, 63 percent nationally
    29 percent good, 33 percent nationally
    0 percent fair, 3 percent nationally
    0 percent poor, 0 percent nationally

Respondents would adopt an average of 3.37 new practices as a consequence of training, compared to 3.25 nationally.

Resource Providers:

300 providers catalogued in RAP file, national average: 482
60 providers used actively, national average: 37

Advisory Committee:

1 meeting was held.

Task Force Membership:

Indian Programs Work Group

Head Start Directors Meetings:

5 meetings were attended, plus 1 regional meeting.

Management Information System:

92 task records were recorded from August 1, 1986, through April 30, 1987, national average: 84.

Head Start Telephone Survey Results:

Satisfaction: 3.5 on a four-point scale, national average: 3.4. Average number of types of contact with RAP: 5.5, national average: 4.3. Problems cited by 5 percent of respondents, 8 percent nationally. 38 percent of the respondents identify training as the most valuable service RAP offers.

SEA Telephone Survey Results:

Satisfaction: 3.0 on a four-point scale, national average: 3.5. Average number of types of contact with RAP: 4.0, national average: 4.2. Frequency of contact: 4.0 on a four-point scale, national average: 2.9.

THE GREAT LAKES RAP

BACKGROUND

Location: Colonel Wolfe School
403 East Healey
Champaign, Illinois 61820
Telephone: (217) 333-3876
Funding Sponsor: University of Illinois
Staff: Merle Karnes, Director
Dennis Sykes, Coordinator
Deborah Ditchen, Program Support Specialist
Nancy Karr, Resource Specialist
George Jesien, Subcontract Manager
Jan Martner, Program Support Specialist
Julie Herwig, Program Support Specialist
Connie Zieher, Program Support Specialist
Margaret Stine, Resource Specialist

Funding Level: $241,434, national average: $210,965; rank: 3.

FTE Salary: $21,121, national average: $24,624; rank: 10.

Full-Time Equivalent Staff: 6.5, national average 4.1; rank: 1.

REGIONAL SITUATION

States Served: Illinois, Indiana, Ohio, Wisconsin, Minnesota, Michigan -- 322,000 square miles, national average: 326,300 square miles; sixth largest geographic area.

Number of Grantees: 220; national average: 114; rank: 2.

FTE per Head Start: 34; national average: 27; rank: 4.

Estimated Number of Head Start Handicapped Children: 11,943; national average: 5,530; rank: 1.

FTE per Handicapped Child: 1,837; national average: 1,334; rank: 4.

Estimated Number of Head Start Teaching Staff: 6,422; national average 3,752; rank: 2.

RAP OPERATIONS

Tasks identified as having major importance:
Conduct an assessment of grantee needs
Provide services and materials to Head Start programs
Provide training to Head Start programs

Tasks identified as having minimal importance:
Establish and conduct advisory committee meeting
Maintain RAPPLE
Assist Head Start grantees with Annual Survey

RAP Training Conferences:

55 trainings were held, national average 38. 3,325 Head Start staff were trained, and 915 others were in attendance. 4,240 total trainees, national average 2,420; rank: 1. 88 percent of all grantees attended training, compared to 94 percent nationally.

Short Term Conference Evaluation:

Respondent Composition:

97 percent Head Start staff, 98 percent nationally
    55 percent teaching staff, 55 percent nationally
    42 percent others, 43 percent nationally
3 percent non-Head Start staff, 2 percent nationally

Respondent Satisfaction:

Satisfaction 3.51 on a four-point scale, 3.60 nationally
    59 percent excellent, 63 percent nationally
    33 percent good, 33 percent nationally
    8 percent fair, 3 percent nationally
    0 percent poor, 0 percent nationally

Respondents would adopt an average of 3.66 new practices as a consequence of training, compared to 3.25 nationally.

Resource Providers:

867 providers catalogued in RAP file, national average: 482
70 providers used actively, national average: 37

Advisory Committee:

1 meeting was held.

Task Force Membership:

Technology Task Force (Chair)
Indian Programs Work Group

Head Start Directors Meetings:

19 meetings were attended, plus 1 regional meeting.

Management Information System:

112 task records were recorded from August 1, 1986, through April 30, 1987, national average: 84.

Head Start Telephone Survey Results:

Satisfaction: 3.5 on a four-point scale, national average: 3.4. Average number of types of contact with RAP: 3.8, national average: 4.3. Problems cited by 5 percent of respondents, 8 percent nationally. 60 percent of the respondents identify training as the most valuable service RAP offers.

SEA Telephone Survey Results:

Satisfaction: 3.8 on a four-point scale, national average: 3.5. Average number of types of contact with RAP: 4.3, national average: 4.2. Frequency of contact: 3.7 on a four-point scale, national average: 2.9.

THE TEXAS TECH UNIVERSITY RAP

BACKGROUND

Location: Texas Tech University
Institute for Child and Family Studies
Post Office Box 4170
Lubbock, Texas 79409
Telephone: (806) 742-3296
Funding Sponsor: Texas Tech University
Staff: Mary Tom Riley, Director
James Mitchell, Coordinator
Tommy Tidwell, Training Specialist
Alfredo Flores, Migrant Specialist
Alvino Lopez, Training Specialist

Funding Level: $236,000, national average: $210,965; rank: 4.

FTE Salary: $33,077, national average; $24,624; rank: 1.

Full-Time Equivalent Staff: 3.4, national average: 4.1; rank: 7.

REGIONAL SITUATION

States Served: Arkansas, Louisiana, New Mexico, Oklahoma, Texas -- 561,000 square miles, national average: 326,300 square miles; third largest geographic area.

Number of Grantees: 149; national average: 114; rank: 3.

FTE per Head Start: 44; national average: 27; rank: 2.

Estimated Number of Head Start Handicapped Children: 7,157; national average: 5,530; rank: 4.

FTE per Handicapped Child: 2,105; national average: 1,334; rank: 1.

Estimated Number of Head Start Teaching Staff: 5,080; national average: 3,752; rank: 4.

RAP OPERATIONS

Tasks identified as having major importance:
Conduct an assessment of grantee needs
Provide services and materials to Head Start programs
Provide training to Head Start programs
Facilitate collaborative agreements
Establish contact with Head Start directors
Participate in national RAP meetings
Participate in RAP task forces
Assist Head Start grantees with Annual Survey

Tasks identified as having minimal importance:
None

RAP Training Conferences:

54 trainings were held, national average 38. 3,866 Head Start staff were trained, and 298 others were in attendance. 4,164 total trainees, national average 2,420; rank: 2. 93 percent of all grantees attended training, compared to 94 percent nationally.

Short-Term Conference Evaluation:

Respondent Composition:
100 percent Head Start staff, 98 percent nationally
47 percent teaching staff, 55 percent nationally
53 percent others, 43 percent nationally
0 percent non-Head Start staff, 2 percent nationally

Respondent Satisfaction:

Satisfaction 3.50 on a four-point scale, 3.60 nationally
54 percent excellent, 63 percent nationally
42 percent good, 33 percent nationally
4 percent fair, 3 percent nationally
0 percent poor, 0 percent nationally

Respondents would adopt an average of 3.76 new practices as a consequence of training, compared to 3.25 nationally.

Resource Providers:

484 providers catalogued in RAP file, national average: 482
25 providers used actively, national average: 37

Advisory Committee:

2 meetings were held.

Task Force Membership:

Technology Task Force
Migrant Task Force

Head Start Directors Meetings:

12 meetings were attended.

Management Information System:

119 task records were recorded from August 1, 1986, through April 30, 1987, national average: 84.

Head Start Telephone Survey Results:

Satisfaction: 3.5 on a four-point scale, national average: 3.4. Average number of types of contact with RAP: 3.9, national average: 4.3. Problems cited by 10 percent of respondents, 8 percent nationally. 38 percent of the respondents identify training as the most valuable service RAP offers.

SEA Telephone Survey Results:

Satisfaction: 2.4 on a four-point scale, national average: 3.5. Average number of types of contact with RAP: 2.8, national average: 4.2. Frequency of contact: 2.0 on a four-point scale, national average: 2.9.

THE REGION VII RAP

BACKGROUND

Location:	University of Kansas Medical Center 39th and Rainbow Boulevard, CRU, Room 26 Kansas City, Kansas 66103
Telephone:	(913) 588-5961
Funding Sponsor:	University of Kansas
Staff:	Carol Dermyer, Co-Director Bethann Smith, Coordinator Marilyn Shankland, Coordinator

Funding Level: $152,598, national average: $210,965; rank: 11.

FTE Salary: $24,781, national average: $24,624; rank: 5.

Full-Time Equivalent Staff: 3.3, national average: 4.1; rank: 10.

REGIONAL SITUATION

States Served: Iowa, Kansas, Missouri, Nebraska -- 285,000 square miles, national average: 326,300 square miles; fifth smallest geographic area.

Number of Grantees: 72; national average: 114; rank: 9.

FTE per Head Start: 22; national average: 27; rank: 8.

Estimated Number of Head Start Handicapped Children: 3,150; national average: 5,530; rank: 7.

FTE per Handicapped Child: 955; national average: 1,334; rank: 7.

Estimated Number of Head Start Teaching Staff: 1,479; national average: 3,752; rank: 9.

RAP OPERATIONS

Tasks identified as having major importance:
Conduct an assessment of grantee needs
Maintain an updated file of resource providers
Provide services and materials to Head Start programs
Provide training to Head Start programs
Facilitate collaborative agreements
Establish contact with Head Start directors

Tasks identified as having minimal importance:
Assist Head Start grantees with Annual Survey

RAP Training Conferences:

23 trainings were held, national average 38. 1,386 Head Start staff were trained, and 494 others were in attendance. 1,880 total trainees, national average 2,420; rank: 8. 99 percent of the grantees attended training, compared to 94 percent nationally.

Short-Term Conference Evaluation:

Respondent Composition:
- 95 percent Head Start staff, 98 percent nationally
  - 53 percent teaching staff, 55 percent nationally
  - 42 percent others, 43 percent nationally
- 5 percent non-Head Start staff, 2 percent nationally

Respondent Satisfaction:

Satisfaction 3.55 on a four-point scale, 3.60 nationally
- 57 percent excellent, 63 percent nationally
- 39 percent good, 33 percent nationally
- 3 percent fair, 3 percent nationally
- 0 percent poor, 0 percent nationally

Respondents would adopt an average of 3.08 new practices as a consequence of training, compared to 3.25 nationally.

Resource Providers:

612 providers catalogued in RAP file, national average: 482
25 providers used actively, national average: 37

Advisory Committee:

1 meeting was held.

Task Force Membership:

Birth-to-Three Task Force

Head Start Directors Meetings:

3 meetings were attended, plus 2 regional meetings.

Management Information System:

62 task records were recorded from August 1, 1986, through April 30, 1987, national average: 84.

Head Start Telephone Survey Results:

Satisfaction: 3.4 on a four-point scale, national average: 3.4. Average number of types of contact with RAP: 4.3, national average: 4.3. Problems cited by 5 percent of respondents, 8 percent nationally. 55 percent of the respondents identify training as the most valuable service RAP offers.

SEA Telephone Survey Results:

Satisfaction: 4.0 on a four-point scale, national average: 3.5. Average number of types of contact with RAP: 6.3, national average: 4.2. Frequency of contact: 2.8 on a four-point scale, national average: 2.9.

THE DENVER RAP

BACKGROUND

Location: Greenlee Metro Lab School
1150 Lipan Street, Room 105
Denver, Colorado 80204
Telephone: (303) 571-1824
Funding Sponsor: Metropolitan State College
Staff: Jane Amundson, Director
Karen Duonnolo, Trainer
Judy Anderson-Wright, Resource Trainer

Funding Level: $185,999, national average: $210,965; rank: 9.

FTE Salary: $27,880, national average: $24,624; rank: 4.

Full-Time Equivalent Staff: 3.4, national average: 4.1; rank: 7.

REGIONAL SITUATION

States Served: Colorado, Montana, North Dakota, South Dakota, Utah, Wyoming -- 574,000 square miles, national average: 326,300 square miles; second largest geographic area.

Number of Grantees: 59; national average: 114; rank: 10.

FTE per Head Start: 17; national average: 27; rank: 9.

Estimated Number of Head Start Handicapped Children: 1,524; national average: 5,530; rank: 11.

FTE per Handicapped Child: 448; national average: 1,334; rank: 11.

Estimated Number of Head Start Teaching Staff: 1,020; national average: 3,752; rank: 11.

RAP OPERATIONS

Tasks identified as having major importance:
Conduct an assessment of grantee needs
Provide services and materials to Head Start programs
Provide training to Head Start programs
Facilitate collaborative agreements

Tasks identified as having minimal importance:
Maintain an updated file of resource providers
Participate in RAP task forces

RAP Training Conferences:

51 trainings were held, national average 38. 992 Head Start staff were trained, and 173 others were in attendance. 1,165 total trainees, national average 2,420; rank: 9. 90 percent of all grantees attended training, compared to 94 percent nationally.

Short-Term Conference Evaluation:

Respondent Composition:

100 percent Head Start staff, 98 percent nationally
61 percent teaching staff, 55 percent nationally
39 percent others, 43 percent nationally
0 percent non-Head Start staff, 2 percent nationally

Respondent Satisfaction:

Satisfaction 3.82 on a four-point scale, 3.60 nationally
82 percent excellent, 63 percent nationally
16 percent good, 33 percent nationally
1 percent fair, 3 percent nationally
0 percent poor, 0 percent nationally

Respondents would adopt an average of 3.51 new practices as a consequence of training, compared to 3.25 nationally.

Resource Providers:

168 providers catalogued in RAP file, national average: 482
30 providers used actively, national average: 37

Advisory Committee:

1 meeting was held.

Task Force Membership:

Indian Programs Work Group

Head Start Directors Meetings:

5 meetings were attended, plus 1 regional meeting.

Management Information System:

81 task records were recorded from August 1, 1986, through April 30, 1987, national average: 84.

Head Start Telephone Survey Results:

Satisfaction: 3.4 on a four-point scale, national average: 3.4. Average number of types of contact with RAP: 4.1, national average: 4.3. Problems cited by 14 percent of respondents, 8 percent nationally. 48 percent of the respondents identify training as the most valuable service RAP offers.

SEA Telephone Survey Results:

Satisfaction: 3.4 on a four-point scale, national average: 3.5. Average number of types of contact with RAP: 3.8, national average: 4.2. Frequency of contact: 2.3 on a four-point scale, national average: 2.9.

THE SOUTHWEST HUMAN DEVELOPMENT RAP

BACKGROUND

Location: 3008 N. Third Street, Suite 302
Phoenix, Arizona 85012
Telephone: (602) 266-5976
Funding Sponsor: Southwest Human Development
Staff: Ginger Ward, Director
Alan Taylor, Co-Director
Judie Englesby-Smith, Coordinator
Linda Radford, Coordinator
Liz Neuman, Trainer

Funding Level: $249,577, national average: $210,965; rank: 1.

FTE Salary: $22,491, national average: $24,624; rank: 9.

Full-Time Equivalent Staff: 6.4, national average: 4.1; rank: 2.

REGIONAL SITUATION

States Served: Arizona, California, Nevada, Hawaii -- 383,000 square miles, national average: 326,300 square miles; fourth largest geographic area.

Number of Grantees: 103; national average: 114; rank: 5.

FTE per Head Start: 16; national average: 27; rank: 10.

Estimated Number of Head Start Handicapped Children: 5,964; national average: 5,530; rank: 6.

FTE per Handicapped Child: 932; national average; 1,334; rank: 8.

Estimated Number of Head Start Teaching Staff: 6,195; national average: 3,752; rank: 3.

RAP OPERATIONS

Tasks identified as having major importance:
Conduct an assessment of grantee needs
Provide services and materials to Head Start programs
Provide training to Head Start programs
Facilitate collaborative agreements
Establish contact with Head Start directors
Participate in national RAP meetings

Tasks identified as having minimal importance:
Maintain an updated file of resource providers
Assist Head Start grantees with Annual Survey

RAP Training Conferences:

68 trainings were held, national average 38. 2,887 Head Start staff were trained, and 486 others were in attendance. 3,373 total trainees, national average 2,420; rank: 4. 98 percent of all grantees attended training, compared to 94 percent nationally.

Short-Term Conference Evaluation:

Respondent Composition:

99 percent Head Start staff, 98 percent nationally
    56 percent teaching staff, 55 percent nationally
    43 percent others, 43 percent nationally
1 percent non-Head Start staff, 2 percent nationally

Respondent Satisfaction:

Satisfaction 3.67 on a four-point scale, 3.60 nationally
    67 percent excellent, 63 percent nationally
    31 percent good, 33 percent nationally
    1 percent fair, 3 percent nationally
    0 percent poor, 0 percent nationally

Respondents would adopt an average of 2.90 new practices as a consequence of training, compared to 3.25 nationally.

Resource Providers:

195 providers catalogued in RAP file, national average: 482
20 providers used actively, national average: 37

Advisory Committee:

2 meetings were held.

Task Force Membership:

Birth-to-Three Task Force
Technology Task Force
Indian Programs Work Group

Head Start Directors Meetings:

8 meetings were attended, plus 12 regional meetings.

Management Information System:

111 task records were recorded from August 1, 1986, through April 30, 1987, national average: 84.

Head Start Telephone Survey Results:

Satisfaction: 3.6 on a four-point scale, national average: 3.4. Average number of types of contact with RAP: 4.4, national average: 4.3. Problems cited by 19 percent of respondents, 8 percent nationally. 57 percent of the respondents identify training as the most valuable service RAP offers.

SEA Telephone Survey Results:

Satisfaction: 3.8 on a four-point scale, national average: 3.5. Average number of types of contact with RAP: 6.3; national average: 4.2. Frequency of contact: 3.0 on a four-point scale, national average: 2.9.

THE PORTLAND STATE UNIVERSITY RAP

BACKGROUND

Location: Portland State University
Post Office Box 1491
Portland, Oregon 97201
Telephone: (503) 229-4615
Funding Sponsor: Portland State University
Staff: Carrillon Olmsted, Director
Mary Perkins, Program Coordinator
Linda Crum, Resource Specialist

Funding Level: $217,995, national average: $210,965; rank: 6.

FTE Salary: $23,671, national average: $24,624; rank: 6.

Full-Time Equivalent Staff: 3.4, national average: 4.1; rank: 7.

REGIONAL SITUATION

States Served: Idaho, Oregon, Washington, Alaska -- 249,000 square miles, 326,300 square miles; largest geographic area.

Number of Grantees: 84; national average: 114; rank: 7.

FTE per Head Start: 25; national average: 27; rank: 6.

Estimated Number of Head Start Handicapped Children: 1,572; national average: 5,530; rank: 10.

FTE per Handicapped Child: 462; national average: 1,334; rank: 10.

Estimated Number of Head Start Teaching Staff: 1,410; national average: 3,752; rank: 10.

RAP OPERATIONS

Tasks identified as having major importance:
Conduct an assessment of grantee needs
Provide services and materials to Head Start programs
Provide training to Head Start programs
Facilitate collaborative agreements

Tasks identified as having minimal importance:
Maintain RAPPLE
Assist Head Start grantees with Annual Survey

RAP Training Conferences:

28 trainings were held, national average 38. 591 Head Start staff were trained, and 173 others were in attendance. 764 total trainees, national average 2,420; rank: 11. 93 percent of all grantees attended training, compared to 94 percent nationally.

Short-Term Conference Evaluation:

Respondent Composition:

93 percent Head Start staff, 98 percent nationally
  68 percent teaching staff, 55 percent nationally
  25 percent others, 43 percent nationally
7 percent non-Head Start staff, 2 percent nationally

Respondent Satisfaction:

Satisfaction 3.52 on a four-point scale, 3.60 nationally
  55 percent excellent, 63 percent nationally
  39 percent good, 33 percent nationally
  4 percent fair, 3 percent nationally
  0 percent poor, 0 percent nationally

Respondents would adopt an average of 2.94 new practices as a consequence of training, compared to 3.25 nationally.

Resource Providers:

558 providers catalogued in RAP file, national average: 482
22 providers used actively, national average: 37

Advisory Committee:

1 meeting was held.

Task Force Membership:

Migrant Task Force
Technology Task Force
Indian Programs Work Group

Head Start Directors Meetings:

8 meetings were attended, plus 1 national meeting.

Management Information System:

74 task records were recorded from August 1, 1986, through April 30, 1987, national average: 84.

Head Start Telephone Survey Results:

Satisfaction: 3.4 on a four-point scale, national average: 3.4. Average number of types of contact with RAP: 5.0, national average: 4.3. Problems cited by 20 percent of respondents, 8 percent nationally. 50 percent of the respondents identify training as the most valuable service RAP offers.

SEA Telephone Survey Results:

Satisfaction: 3.6 on a four-point scale, national average: 3.5. Average number of types of contact with RAP: 3.5, national average: 4.2. Frequency of contact: 3.3 on a four-point scale, national average: 2.9.

APPENDIX B

SEA IMPRESSIONS OF THE RAP NETWORK: INDIVIDUAL RAP SUMMARIES

SEA Profile

New England

	12/87	9/86	6/85	6/84	6/83	6/82	6/81
Frequency Index (0-4)	2.8	2.8	2.7	2.8	3.0	2.8	1.8
Average no. types of contact	4.2	5.4	5.2	5.6	4.8	5.8	3.8
Satisfaction grade (1-4)	3.6	3.7	3.5	3.7	4.0	3.6	3.2

Abbreviated Contents of Interviews

							12/87 Indexes	
States served	CT	ME	MA	NH	RI	VT	NE RAP	NAT'L
Frequency of contact	3	1	4	2	4	3	2.8	2.9
Satisfaction grade	3.0	3.0	4.0	3.75	4.0	4.0	3.6	3.5
Types of contact							4.2	4.2
AC	x	x						
Meetings, etc.	x		x	x	x			
Materials				x		x		
SEA/HS collab.			x		x	x		
LEA/HS collab.								
SEA as provider			x	x	x			
RAP as provider			x		x			
Info exchange	x	x	x	x	x	x		
Mutual project								
Other				x				
Intro contact					x			
None								

Most Valued Service

Connecticut: RAP serves as a resource to the SEA; training.

Maine: Training.

Rhode Island: RAP serves as a resource to the SEA; sounding boards; mediator.

Massachusetts: RAP serves as a liaison between the SEA and Head Start.

New Hampshire: Collaboration and networking with agencies.

Vermont: Collaboration.

Suggestions

Connecticut: Hope to re-initiate earlier activities and level of effort.

Maine: Hope RAP will intensify PL 99-457 training on identification, working in mainstreaming setting, preparing handicapped children and families for their next environment (which may not be as good as the preschool situation).

Rhode Island: Financial back-up to continue doing the work they do.

Problem

None

SEA Profile

New York University RAP

	12/87	9/86	6/85	6/84	6/83	6/82	6/81
Frequency Index (0-4)	2.8	3.0	2.0	1.3	2.5	3.0	4.0
Average no. types of contact	3.8	7.0	2.8	3.3	4.5	5.5	5.5
Satisfaction grade (1-4)	3.9	3.5	2.8	2.3	4.0	3.0	3.3

Abbreviated Contents of Interviews

					12/87 Indexes	
States Served	NJ	NY	PR	VI	NYU RAP	NAT'L
Frequency of contact	3	3	1	4	2.8	2.9
Satisfaction grade	4.0	3.5	4.0	4.0	3.9	3.5
Types of contact					3.8	4.2
AC	x	x				
Meetings, etc.	x	x	x	x		
Materials		x	x	x		
SEA/HS collab.						
LEA/HS collab.						
SEA as provider						
RAP as provider	x	x				
Info exchange	x	x	x	x		
Mutual project						
Other						
Intro contact						
None						

Most Valued Service

New Jersey: RAP Advisory Committee allows me to know what is going on in other states, exchange ideas and materials.

New York: RAP serves as a liaison between the SEA and Head Start.

Puerto Rico: Materials (newsletter).

Virgin Islands: RAP serves as a resource to the SEA (information for parents and staff; training).

Suggestions

Puerto Rico: Would like to develop an interagency agreement. Especially need help with transition between Head Start and public school. Maybe an agreement. Would like a training session for Head Start and SEA supervisors.

Problems

None

SEA Profile

University of Maryland RAP

	12/87	9/86	6/85	6/84	6/83	6/82	6/81
Frequency Index (0-4)	3.0	2.0	N/A	N/A	N/A	N/A	N/A
Average no. types of contact	3.2	3.2	N/A	N/A	N/A	N/A	N/A
Satisfaction grade (1-4)	3.5	2.7	N/A	N/A	N/A	N/A	N/A

Abbreviated Contents of Interviews

							12/87 Indexes	
States served	DE	DC	MD	PA	VA	WV	U OF MD RAP	NAT'L
Frequency of contact	4		4	2	1	4	3.0	2.9
Satisfaction grade	3.5		4.0	2.5	3.5	4.0	3.5	3.5
Types of contact							3.2	4.2
AC	x	N	x	x				
Meetings, etc.		O	x					
Materials			x	x				
SEA/HS collab.		I	x					
LEA/HS collab.		N	x					
SEA as provider		T						
RAP as provider		E			x			
Info exchange	x	R	x	x	x	x		
Mutual project		V	x					
Other		I	x					
Intro contact		E						
None		W						

Most Valuable Service

Delaware: Training; the RAP Advisory Committee brings people together who need to coordinate.

Maryland: RAP serves as a liaison between the SEA and Head Start.

Virginia: Materials (newsletters).

West Virginia: Materials.

Pennsylvania: RAP serves as a liaison between the SEA and Head Start.

Suggestions

Delaware: Update the state agreement. At RAP's next visit to this state, arrange a half-day meeting with SEA and Head Start directors for planning. No personal contact this year. Would like more contact especially for long-range planning with Head Start directors.

Pennsylvania: Would like more phone contact -- maybe once a month. Like to continue RAP Advisory Committee and technical assistance. Always helpful; a little more contact.

West Virginia: Need to look at the gap between SEA and Head Start. Look at ways to work together and gather information.

Problems

None

SEA Profile

Chapel Hill RAP

	12/87	9/86	6/85	6/84	6/83	6/82	6/81
Frequency Index (0-4)	2.9	2.5	2.5	3.5	2.8	2.7	3.3
Average no. types of contact	4.1	5.8	4.3	6.0	4.8	5.7	4.5
Satisfaction grade (1-4)	3.8	4.0	4.0	4.0	4.0	4.0	3.9

Abbreviated Contents of Interviews

								12/87 Indexes	
States served	FL	GA	NC	SC	AL	KY	TN	CH RAP	NAT'L
Frequency of contact	4	3	4	2	2	4	1	2.9	2.9
Satisfaction grade	4.0	4.0	4.0	3.5	3.0	4.0	*	3.8	3.5
Types of contact								4.1	4.2
AC		x					x		
Meetings, etc.	x	x	x	x		x	x		
Materials	x	x	x	x	x	x	x		
SEA/HS collab.		x							
LEA/HS collab.		x							
SEA as provider				x					
RAP as provider			x						
Info exchange	x	x	x	x	x	x			
Mutual project						x			
Other		x	x		x				
Intro contact									
None									

Most Valuable Service

Florida: RAP serves as a resource to the SEA; training.

North Carolina: Materials; dissemination of information.

South Carolina: RAP serves as a liaison between the SEA and Head Start; training.

Georgia: Expertise on national issues.

Alabama: Materials.

Kentucky: Training; collaboration.

Tennessee: Training.

---

*Staff too new to give a rating.

Suggestions

Georgia: More resources or staff.

North Carolina: More staff. Don't know how they do as much with staff they have.

Alabama: Would like to know other ways for SEA to work with RAP. Please give us some suggestions.

Problems

Kentucky: Would like to secure RAP funding and make it ample. Don't like the competitive process for funding. Don't want to lose Chapel Hill.

SEA Profile

Mississippi RAP

	12/87	9/86	6/85	6/84	6/83	6/82	6/81
Frequency Index (0-4)	4.0	2.0	3.0	1.0	2.0	3.0	2.0
Average no. types of contact	4.0	5.0	4.0	2.0	2.0	3.0	8.0
Satisfaction grade (1-4)	3.0	2.5	4.0	3.5	3.5	3.0	3.0

Abbreviated Contents of Interviews

		12/87 Indexes	
State Served	MS	MS RAP	NAT'L
Frequency of contact	4	4.0	2.9
Satisfaction grade	3.0	3.0	3.5
Types of contact		4.0	4.2
AC	x		
Meetings, etc.	x		
Materials			
SEA/HS collab.			
LEA/HS collab.			
SEA as provider			
RAP as provider			
Info exchange	x		
Mutual project			
Other	x		
Intro contact			
None			

Most Valuable Service

Mississippi: Don't know (new staff).

Suggestions

Mississippi: Could use more background on Head Start like information on Head Start legislation, regulations, performance standards. I don't understand the CDA degree. How are Head Start children to be counted?

Problems

None

SEA Profile

Great Lakes RAP

	12/87	9/86	6/85	6/84	6/83	6/82	6/81
Frequency Index (0-4)	3.7	4.0	4.0	4.0	3.7	2.3	3.0
Average no. types of contact	4.3	6.7	6.0	6.0	5.0	4.3	5.7
Satisfaction grade (1-4)	3.8	4.0	4.0	4.0	3.7	3.3	4.0

Abbreviated Contents of Interviews

							12/87 Indexes	
States served	IL	IN	OH	MI	MN	WI	Great Lakes	NAT'L
Frequency of contact	3	4	3	4	4	4	3.7	2.9
Satisfaction grade	4.0	4.0	4.0	4.0	2.5	4.0	3.8	3.5
Types of contact							4.3	4.2
AC	x	x		x	x	x		
Meetings, etc.	x	x	x	x				
Materials			x			x		
SEA/HS collab.								
LEA/HS collab.								
SEA as provider								
RAP as provider			x					
Info exchange	x	x	x	x	x	x		
Mutual project	x	x	x		x			
Other	x			x		x		
Intro contact								
None								

Most Valuable Service

Indiana: RAP serves as a liaison between the SEA and the Head Start.

Illinois: RAP serves as a resource to Head Start.

Ohio: Training; collaboration (transition into public schools).

Michigan: Training.

Minnesota: RAP serves as a liaison between the SEA and Head Start; a contact for the state.

Wisconsin: RAP has served as a resource to the SEA on topical information, especially computers, in the last few years.

Suggestions

Indiana: Increase RAP funding to afford assigning one RAP person per state so Indiana could have a Head Start person on interagency council, etc.

Illinois: Find additional ways to facilitate cooperative ventures between local Head Starts and SEAs for programs for 3-5 year olds.

Ohio: Make people aware of Head Start.

Michigan: Want RAP's help to design a parents' presentation (and maybe a video tape) to be used for helping preschool special education people to understand why parents are choosing Head Start for their children.

Minnesota: Send us Advisory Committee agendas. Have a purpose. Use us in an advisory, not general, capacity.

Wisconsin: I'm not real clear yet what the division of responsibilities is between Portage Project and University of Illinois. (Not their problem; it's mine.)

Problems

Michigan: Need contact. Haven't heard anything this fall, except receipt of a letter. It is time we take the initiative and go back to the schools.

Minnesota: Have been mixed up on dates of the advisory committee. Sense that they're holding advisory committee meetings because they are required to and not for a purpose. That doesn't make me want to go.

SEA Profile

Texas Tech RAP

	12/87	9/86	6/85	6/84	6/83	6/82	6/81
Frequency Index (0-4)	2.0	2.2	1.6	2.0	2.0	1.8	1.8
Average no. types of contact	2.8	3.2	2.4	2.6	4.3	2.0	2.6
Satisfaction grade (1-4)	2.4	3.1	3.0	2.8	2.9	2.8	3.3

Abbreviated Contents of Interviews

						12/87 Indexes	
States served	TX	AR	LA	NM	OK	TT RAP	NAT'L
Frequency of contact	4	4	1	0	1	2.0	2.9
Satisfaction grade	4.0	2.85	*	*	3.0	2.4	3.5
Types of contact						2.8	4.2
AC			x				
Meetings, etc.	x	x	x				
Materials							
SEA/HS collab.	x						
LEA/HS collab.							
SEA as provider							
RAP as provider		x					
Info exchange	x	x	x	x	x		
Mutual project	x	x					
Other		x					
Intro contact							
None							

Most Valuable Service

New Mexico: Don't know (new staff).

Arkansas: RAP serves as a resource to the SEA; training; link with Regional Office.

Oklahoma: TIP.

Louisiana: RAP has functioned as a stimulator, a source of Federal information, the only group who could get different constituents together across states. I hope they do it again.

Texas: Training; the 800-number hotline; accessibility to information.

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*Too little contact to give rating.

Suggestions

Arkansas: Improve communication by mail system. More attention should be given to advance planning as a group.

Louisiana: Increased contact. They used to notify us when they came into the state -- wish they would again so we could send our people to RAP activities.

New Mexico: Would like to hear from RAP.

Oklahoma: Would like to receive the newsletter. Want more communication from RAP to SEA.

Problems

Arkansas: Communication by mail is a problem.

Louisiana: No... I just haven't seen them this year.

New Mexico: Don't know.

SEA Profile

Region VII RAP

	12/87	9/86	6/85	6/84	6/83	6/82	6/81
Frequency Index (0-4)	2.8	3.8	3.0	1.6	3.5	3.3	2.0
Average no. types of contact	6.3	5.8	5.3	4.3	4.8	6.0	4.0
Satisfaction grade (1-4)	4.0	3.9	3.5	3.5	3.6	3.8	3.4

Abbreviated Contents of Interviews

					12/87 Indexes	
States served	IA	KS	MO	NB	R VII RAP	NAT'L
Frequency of contact	2	2	3	4	2.8	2.9
Satisfaction grade	4.0	4.0	4.0	4.0	4.0	3.5
Types of contact					6.3	4.2
AC		x	x	x		
Meetings, etc.		x	x			
Materials	x		x	x		
SEA/HS collab.			x			
LEA/HS collab.						
SEA as provider		x				
RAP as provider	x		x	x		
Info exchange	x	x	x	x		
Mutual project				x		
Other	x	x	x	x		
Intro contact						
None						

Most Valuable Service

Missouri: RAP serves as a resource to the SEA.

Kansas: Materials.

Iowa: RAP serves as a liaison between the SEA and Head Start.

Nebraska: Materials; the RAP role of facilitation at RAP Advisory Committee meetings because it is relevant, professionally beneficial, and useful for cross-agency interaction.

Suggestions

Kansas: Conduct on-site visits as much as possible.

Missouri: RAP has a key role to play working with public schools serving young handicapped children. RAP is a mediator for placement of young children in Head Start. Keep the information on Head Start coming because there is no state Head Start. Need a state Head Start representative.

Problems

None

SEA Profile

The Denver RAP

	12/87	9/86**	6/85	6/84	6/83	6/82	6/81
Frequency Index (0-4)	2.3	2.8	2.8	2.6	2.5	2.3	2.5
Average no. types of contact	3.8	5.5	3.8	2.6	3.8	4.0	3.3
Satisfaction grade (1-4)	3.4	3.9	3.6	3.6	3.7	3.4	3.8

Abbreviated Contents of Interviews

							12/87 Indexes	
States served	CO	MT	ND	SD	UT	WY	DENVER RAP	NAT'L
Frequency of contact	4	1	1	2	3	3	2.3	2.9
Satisfaction grade	4.0	*	3.0	3.0	3.0	4.0	3.4	3.5
Types of contact							3.8	4.2
AC	x	x		x	x			
Meetings, etc.			x			x		
Materials				x		x		
SEA/HS collab.				x				
LEA/HS collab.								
SEA as provider						x		
RAP as provider			x			x		
Info exchange	x	x	x	x	x	x		
Mutual project	x							
Other	x				x			
Intro contact								
None								

Most Valuable Service

North Dakota: RAP serves as a resource to the SEA; training; materials; information on developing interagency agreements.

Colorado: RAP serves as a liaison between the SEA and Head Start; training.

Montana: Don't know (new staff).

Utah: Training.

Wyoming: Networking.

South Dakota: RAP serves as a resource to the SEA; training; materials (directory on Head Start nationwide).

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*Staff too new to give a rating.

**The sponsoring institution changed from the University of Denver to Metropolitan State College, but the project director and core staff remained unchanged. We are, therefore, displaying information from previous years' work for comparison.

Suggestions

Colorado: Carefully, immediately, and proactively evaluate the current administering agency of RAP. RAP is basically not viable since September.

North Dakota: More frequent contact, e.g., a letter quarterly about what is happening in Head Start regionally and what RAP is doing.

South Dakota: Arrange that a state is served by only one RAP (re Indian grantees).

Wyoming: Continue dialogue with other state early childhood providers not just Head Start. Many early childhood programs don't network and communicate. Jane is very skilled.

Problems

Colorado: Two positions have been left unfilled. Gravely concerned about the administration of the RAP.

SEA Profile

Southwest Human Development RAP

	12/87	9/86	6/85	6/84	6/83	6/82	6/81
Frequency Index (0-4)	3.0	3.3	N/A	N/A	N/A	N/A	N/A
Average no. types of contact	6.3	6.0	N/A	N/A	N/A	N/A	N/A
Satisfaction grade (1-4)	3.8	3.5	N/A	N/A	N/A	N/A	N/A

Abbreviated Contents of Interviews

					12/87 Indexes	
States served	AZ	CA	NV	HI	SWHD RAP	NAT'L
Frequency of contact	4	4	4	1	3.0	2.9
Satisfaction grade	4.0	4.0	3.5	*	3.8	3.5
Types of contact					6.3	4.2
AC	x	x	x			
Meetings, etc.		x	x			
Materials						
SEA/HS collab.	x	x				
LEA/HS collab.						
SEA as provider			x	x		
RAP as provider		x	x	x		
Info exchange	x	x	x	x		
Mutual project	x	x	x			
Other	x	x				
Intro contact				x		
None						

Most Valuable Service

California: RAP serves as a liaison between SEA and Head Start; sounding board; accessibility.

Arizona: Training; general support (getting information, providing services, referrals).

Nevada: Training.

Hawaii: RAP as a resource to the SEA; materials.

---

*Staff too new to give a rating.

Suggestions

Arizona: Always a need for more information on national trends, what other states are doing, what is happening for Head Start and RAP.

Nevada: Grantees need on-site technical assistance, especially rural grantees. Feds should fund high enough to allow more on-site RAP work. This RAP has made extra efforts to get on-site which SEA appreciates.

Hawaii: Clarify role and what the relationship should be and the expectations for our relationship.

Problems

None

SEA Profile

Portland State University RAP

	12/87	9/86	6/85	6/84	6/83	6/82	6/81
Frequency Index (0-4)	3.3	3.7	3.0	2.0	2.0	2.3	1.0
Average no. types of contact	3.5	5.7	4.7	4.7	3.0	3.0	2.0
Satisfaction grade (1-4)	3.6	3.7	4.0	2.8	2.5	2.7	3.0

Abbreviated Contents of Interviews

					12/87 Indexes	
States served	ID	OR	WA	AK	PSU RAP	NAT'L
Frequency of contact	3	4	4	2	3.3	2.9
Satisfaction grade	3.5	4.0	4.0	3.0	3.6	3.5
Types of contact					3.5	4.2
AC	x					
Meetings, etc.						
Materials	x					
SEA/HS collab.		x	x			
LEA/HS collab.						
SEA as provider	x	x				
RAP as provider		x				
Info exchange	x	x	x	x		
Mutual project	x					
Other		x	x			
Intro contact						
None						

Most Valuable Service

Washington: Training.

Oregon: RAP serves as a resource to the SEA; materials; their time.

Idaho: RAP serves as a resource to Head Start; training.

Alaska: RAP serves as a resource to the SEA; collaboration (sharing information from collaboration with other states).

Suggestions:

Idaho: We ought to commit more in writing; for example, develop an annual plan of activities. Not an unwillingness, just a shortage of travel money and time. There is more that we can do. Need to clarify RAP's future prospects.

Oregon: There is an awful lot being demanded of RAP staff without the level of support that should be expected.

Alaska: Head Starts need RAP's focused training. Could RAP arrange for a pool of consultants? More communication. Perhaps I could get a schedule of RAP work in Alaska.

Problems

Alaska: The lack of money for more travel and on-site work in Alaska has crippled some of what occurred in the past. A gap in services exists.